01/26/2010 16:57

Image# 10930114194

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORIVI 3X | For Othe | er Than An | Authorize | d Committ | ee | | Office Use | Only | |
|---|-----------------|--------------------------------|----------------------|---------------------------------|----------------------|---------------|----------------|---------------------|------------------------------------|
| NAME OF COMMITTEE (in full) | | MAILING LAE OR PRINT | | ample:If typing er the lines | ı, type | | |] | |
| Baxter Healthcare Political | Action Comm | nittee | | | | | | | |
| | | | | | | | | | |
| ADDRESS (number and street) | | Street, NW | | | | | | | |
| Check if different | Suite 3 | /5 | | | | | | | |
| than previously reported. (ACC) | Washir | ngton | | | | DC | 200 | 05 | |
| 2. FEC IDENTIFICATION NU | JMBER 🖫 | | CITY 🛋 | | : | STATE | Z | IPCODE # | L |
| C00117838 | | | 3. IS THIS REPORT | | NEW (N) OR | | AMENDED (A) | | |
| 4. TYPE OF REPORT (Choose One) | | onthly eport ue On: | Feb 20 (M2 |) | May 20 (M5) | A | ug 20 (M8) | | 20 (M11) n-Election of Only) |
| (a) Quarterly Reports: | | ue On. | Mar 20 (M3 |) | Jun 20 (M6) | S | ep 20 (M9) | Dec (Nor Year | 20 (M12) n-Election (Only) |
| April 15 | _ | | Apr 20 (M4 |) . | Jul 20 (M7) | 0 | ct 20 (M10) | χ Jan | 31 (YE) |
| Quarterly Report | (c) | 12-Day PRE -Election | | Primary (12F | P) | Genera | al (12G) | Run | off (12R) |
| Quarterly Report October 15 Quarterly Report | | Report for t | | Convention (| 12C) | Specia | l (12G) | | |
| January 31 Quarterly Report | | E | Election on | | | | | n the State of | · |
| July 31 Mid-Year Report(Non-elect Year Only) (MY) | | 30-Day Post -Elect | | General (300 | G) | Runoff | (30R) | Spe | cial (30S) |
| Termination Rep (TER) | ort | · | Election on | | | | | n the State of | |
| 5. Covering Period | 12 0 | 200 | 9 | through | 12 | 3 1 | 2009 | | |
| I certify that I have examined this | s Report and | to the best of r | ny knowledge | and belief it is | true, correct | and complet | e. | | |
| Type or Print Name of Treasure | r Sarah | Creviston | | | | | | | |
| Signature of Treasurer Elect | ronically Filed | l by Sarah C | reviston | | | oate 0 | 1 26 | 2 0 1 | 0 |
| NOTE : Submission of false, er | roneous, or in | complete infor | mation may s | ubject the pers | on signing thi | s Report to t | he penalties o | f 2 U.S.C 4 | 37g. |
| Office Use | | | | | | | FEC F | FORM 3 | X |

FE6AN026

 $\textbf{A.} \hspace{0.2cm} \textbf{Form/Schedule}: \hspace{0.2cm} \textbf{F3X}$

Transaction ID:

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

3/87

Write or Type Committee Name Baxter Healthcare Political Action Committee

FEC Form 3X (Rev. 02/2003)

" D 12 0 1 2009 12 31 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 71894.25 January 1 (b) Cash on Hand at 35969.36 Begining of Reporting Period 13508.69 156233.80 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 49478.05 228128.05 6(a) and 6(c) for Column B) 8250.00 186900.00 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 41228.05 41228.05 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 4 / 87

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

From:

м м 1 2 D D D 1

^Y 2009

Тο:

м м 1 2 D D 31

^Y 2009

| I. Receipts | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | |
|-------------|--|-------------------------------|-----------------------------------|--|
| | Contributions (other than loans) From: a) Individuals/Persons Other | | | |
| | Than Political Committees (i) Itemized (use Schedule A) | 11822.04 | 118066.99 | |
| | (ii) Unitemized | 1686.65 | 38166.81 | |
| | (iii) TOTAL (add Lines 11(a)(i) and (ii) | 13508.69 | 156233.80 | |
| (I | b) Political Party Committees | 0.00 | 0.00 | |
| ` | c) Other Political Committees (such as PACs) | 0.00 | 0.00 | |
| | 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 13508.69 | 156233.80 | |
| | Fransfers From Affiliated/Other Party Committees | 0.00 | 0.00 | |
| 3. A | All Loans Received | 0.00 | 0.00 | |
| | oan Repayments Received Offsets To Operating Expenditures | 0.00 | 0.00 | |
| (| Refunds, Rebates, etc.) Carry Totals to Line 37, page 5) | 0.00 | 0.00 | |
| to | o Federal candidates and Other Political Committees | 0.00 | 0.00 | |
| | Other Federal Receipts Dividends, Interest, etc.) | 0.00 | 0.00 | |
| | Fransfers from Non-Federal and Levin Funds | | | |
| (; | a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 | |
| (I | b) Levin Funds (from Schedule H5) | 0.00 | 0.00 | |
| (0 | c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 | |
| | Otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c)) | 13508.69 | 156233.80 | |
| | otal Federal Receipts subtract Line 18(c) from Line 19) | 13508.69 | 156233.80 | |

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

5 / 87

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|--------------------------------|
| Operating Expenditures: (a) Shared Federal/Non-Federal | | |
| Activity (from Schedule H4) | 0.00 | 0.00 |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures | | |
| (add 21(a)(i), (a)(ii) and (b)) | 0.00 | 0.00 |
| Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 |
| 3. Contributions to | | 0.00 |
| Federal Candidates/Committeesand Other Political Committees | 6000.00 | 174000.00 |
| 4. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| Coordinated Expenditures Made by Party | | |
| Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 |
| 6. Loan Repayments Made | 0.00 | 0.00 |
| 7. Loans Made | 0.00 | 0.00 |
| Refunds of Contributions To: (a) Individuals/Persons Other | | |
| Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees | 0.00 | 0.00 |
| (such as PACs)(d) Total Contribution Refunds | 0.00 | 0.00 |
| (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 9. Other Disbursements | 2250.00 | 12900.00 |
| O Fordered Floriday April the (OLL C.C. 404 (00)) | | |
| Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity | | |
| (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely | 0.00 | 0.00 |
| With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 1. Total Disbursements (add Lines 21(c), 22, | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 8250.00 | 186900.00 |
| 2. Total Federal Disbursements | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) | | |
| from Line 31) | 8250.00 | 186900.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 6 / 87

| | ontributions/Operating openditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---|-------------------------------|-----------------------------------|
| | ons (other than loans) | 13508.69 | 156233.80 |
| 34. Total Contributi (from Line 28(d | on Refunds | 0.00 | 0.00 |
| | ns (other than loans) 34 from Line 33) | 13508.69 | 156233.80 |
| | perating Expenditures (i) and Line 21(b)) | 0.00 | 0.00 |
| • | rating Expenditures page 3) | 0.00 | 0.00 |
| 88. Net Operating E | Expenditures | 0.00 | 0.00 |

FE6AN026

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|---|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co | d Statements may not be sold or used by any perso the name and address of any political committee to ommittee | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Peter J. Arduini Mailing Address 1059 Warrington Ro | nad. | Date of Receipt |
| City | State Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-55 |
| Deerfield | IL 60015 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 100.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General | Occupation Cvp, Pres Medication Delivery Aggregate Year-to-Date ▼ | 1 |
| Other (specify) ▼ Full Name (Last, First, Middle Initial) Peter J. Arduini Mailing Address 1059 Warrington Ro | pad | Date of Receipt |
| City Deerfield | State Zip Code IL 60015 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-54 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 100.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation Cvp, Pres Medication Delivery Aggregate Year-to-Date ▼ 2600.00 | |
| Full Name (Last, First, Middle Initial) Robert H. Armstrong | | Date of Receipt |
| Mailing Address 133 Manchester Driv | /e | M M / D D / Y Y Y Y Y 1 1 2 1 1 1 2 0 0 9 |
| City Waukesha | State Zip Code WI 53188 | Transaction ID: 2010011316304-59 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, R&D Medical Devices | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1300.00 | |
| SUBTOTAL of Receipts This Page (optional) |) | 250.00 |

A.

В.

C.

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 8 / 87 (check only one) X 11a 11b 11c 12 |
|---|---|---|
| Any information copied from such Reports and Stateme | | 13 14 15 16 17 |
| or for commercial purposes, other than using the name | and address of any political committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Committee | ee | |
| Full Name (Last, First, Middle Initial) Robert H. Armstrong | | Date of Receipt |
| Mailing Address 133 Manchester Drive | | 12 25 2009 |
| City | State Zip Code | Transaction ID: 20100113163038-58 |
| Waukesha \ | VI 53188 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 50.00 |
| Rayter Healthcáre Cornora | ccupation P, R&D Medical Devices | |
| Receipt For: Primary General Other (specify) ▼ | ggregate Year-to-Date ▼ 1300.00 | |
| Full Name (Last, First, Middle Initial) Robert G. Babicke | | Date of Receipt |
| Mailing Address 162 Cardinal Drive | | 12 11 2009 |
| • | State Zip Code | Transaction ID: 2010011316304-97 |
| Hawthorn Woods I | L 60047 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 25.00 |
| Baxter Healthcáre Corpora- tion VF | ccupation P, Information Technology | |
| Receipt For: Primary General Other (specify) | ggregate Year-to-Date ▼ 650.00 | |
| Full Name (Last, First, Middle Initial) Robert G. Babicke | | Date of Receipt |
| Mailing Address 162 Cardinal Drive | | 12 25 2009 |
| • | State Zip Code | Transaction ID: 20100113163038-96 |
| | L 60047 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 25.00 |
| Baxter Healthcáre Corpora- tion VF | ccupation P, Information Technology | |
| | ggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 650.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 100.00 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 9 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|--|--|---|
| Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (| nd Statements may not be sold or used by any person the name and address of any political committee to Committee | |
| Full Name (Last, First, Middle Initial) Donald Arthur Baker Mailing Address 286 Whitworth City Thousand Oaks FEC ID number of contributing | State Zip Code CA 91360 | Date of Receipt 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-157 Amount of Each Receipt this Period |
| federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation VP li, Quality Aggregate Year-to-Date 1798.40 | 69.79 |
| Full Name (Last, First, Middle Initial) Donald Arthur Baker Mailing Address 286 Whitworth | | Date of Receipt 1 2 2 5 2 0 0 9 |
| City | State Zip Code | Transaction ID: 20100113163038-157 |
| Thousand Oaks FEC ID number of contributing federal political committee. | CA 91360 | Amount of Each Receipt this Period 69.79 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation VP Ii, Quality Aggregate Year-to-Date 1798.40 |] |
| Full Name (Last, First, Middle Initial) Michael J. Baughman Mailing Address 5343 N Lakewood | Avenue | Date of Receipt |
| | State Zip Code | 12 11 2009 |
| City <u>Chicago</u> | IL 60640 | Transaction ID: 2010011316304-166 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 100.00 |
| Name of Employer Baxter International Inc. | Occupation Cvp, Controller | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 2600.00 | |
| SUBTOTAL of Receipts This Page (optional | | 239.58 |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | Use separate schedule(s for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 10 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11 |
|--|--|---|
| Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | g the name and address of any political committ | person for the purpose of soliciting contributions ee to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Michael J. Baughman Mailing Address 5343 N Lakewood | Avenue | Date of Receipt |
| City Chicago FEC ID number of contributing | State Zip Code IL 60640 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-166 Amount of Each Receipt this Period 100.00 |
| Receipt For: Primary Other (specify) General | Occupation Cvp, Controller Aggregate Year-to-Date 2600.00 | |
| Full Name (Last, First, Middle Initial) Edwin A. Betancourt-Morales Mailing Address 101 N E 3rd Aven | ue, Ste 1600 | Date of Receipt |
| City Ft Lauderdale FEC ID number of contributing | State Zip Code FL 33301 | Transaction ID: 2010011316304-186 Amount of Each Receipt this Period 43.92 |
| Receipt For: Primary Other (specify) ▼ | Occupation VP, Mfg Latin America Aggregate Year-to-Date ▼ 1134.24 | |
| Full Name (Last, First, Middle Initial) Edwin A. Betancourt-Morales Mailing Address 101 N E 3rd Avenue | ue, Ste 1600 | Date of Receipt |
| City Ft Lauderdale FEC ID number of contributing | State Zip Code FL 33301 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-186 Amount of Each Receipt this Period 43.92 |
| federal political committee. Name of Employer Baxter Export Corporation | Occupation VP, Mfg Latin America | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1134.24 | |
| SUBTOTAL of Receipts This Page (option | al) | 187.84 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 11 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|--|---|
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may not be sold or used by any persole name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co | mmittee | |
| Full Name (Last, First, Middle Initial) David L. Bonderud | | Date of Receipt |
| Mailing Address 22294 W. Brookside | • | 12 25 2009 |
| City Lake Barrington | State Zip Code IL 60010 | Transaction ID: 20100113163038-25 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 20.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation President | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.00 | |
| Full Name (Last, First, Middle Initial) Kristina (Tina) R. Borucki | | Date of Receipt |
| Mailing Address 5305 Cobblers Cross | | 12 11 2 2009 |
| City McHenry | State Zip Code IL 60050 | Transaction ID: 2010011316304-43 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 19.57 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Business Operations Analyst | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 234.84 | |
| Full Name (Last, First, Middle Initial) Kristina (Tina) R. Borucki | | Date of Receipt |
| Mailing Address 5305 Cobblers Cross | ing | 12 25 2009 |
| City McHenry | State Zip Code IL 60050 | Transaction ID: 20100113163038-42 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 19.57 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Business Operations Analyst | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 234.84 | |
| SUBTOTAL of Receipts This Page (optional) | | 59.14 |
| TOTAL This Period (last page this line number | r only) | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 12 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|---|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | e name and address of any political committee | son for the purpose of soliciting contributions |
| Baxter Healthcare Political Action Cor | nmittee | |
| Full Name (Last, First, Middle Initial) William P. Botha | | Date of Receipt |
| Mailing Address 2225 Robinson Street | | 12 11 2009 |
| City Redondo Beach | State Zip Code CA 90278 | Transaction ID: 2010011316304-49 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 75.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, Manufacturing | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1425.00 | |
| Full Name (Last, First, Middle Initial) William P. Botha | | Date of Receipt |
| Mailing Address 2225 Robinson Street | | 12 25 2009 |
| City Redondo Beach | State Zip Code CA 90278 | Transaction ID: 20100113163038-48 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 75.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, Manufacturing | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1425.00 | |
| Full Name (Last, First, Middle Initial) Michael Bradley | | Date of Receipt |
| Mailing Address 137 Glenview Drive | | 12 25 2009 |
| City Martinez | State Zip Code CA 94553 | Transaction ID: 20100113163038-158 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 10.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Healthcare Econ & Reimburs | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 160.00 |
| TOTAL This Period (last page this line number | only) | <u> </u> |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 13 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|---|--|
| Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | nd Statements may not be sold or used by any person the name and address of any political committee to s | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Jan M. Brase Mailing Address 8899 106th Ave | | Date of Receipt |
| City | State Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-58 |
| Pleasant Prairie FEC ID number of contributing federal political committee. | WI 53158 | Amount of Each Receipt this Period 10.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation Dir, Marketing Aggregate Year-to-Date 230.00 | |
| Full Name (Last, First, Middle Initial) Jan M. Brase Mailing Address 8899 106th Ave | | Date of Receipt 1 2 2 5 2 0 0 9 |
| City Pleasant Prairie FEC ID number of contributing federal political committee. | State Zip Code WI 53158 | Transaction ID: 20100113163038-57 Amount of Each Receipt this Period 10.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General Other (specify) ▼ | Occupation Dir, Marketing Aggregate Year-to-Date 230.00 | |
| Full Name (Last, First, Middle Initial) John J. Bratsakis | | Date of Receipt |
| Mailing Address 2405 Trailside Lane | | 12 11 2 2009 |
| City <u>Wauconda</u> | State Zip Code IL 60084 | Transaction ID: 2010011316304-86 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Bcu Sr VP, Business Devlp | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |
| SUBTOTAL of Receipts This Page (optional | 1) | 45.00 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | A) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 14/8/ (check only one) |
|---|---------------------------------------|---|---|
| Any information copied from such Reports a or for commercial purposes, other than using | nd Statements may the name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | Committee | | |
| Full Name (Last, First, Middle Initial) John J. Bratsakis | | | Date of Receipt |
| Mailing Address 2405 Trailside Lan | e | | M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y |
| City Wauconda | State IL | Zip Code 60084 | Transaction ID: 20100113163038-85 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 25.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupatio Bcu Sr V | n P, Business Devlp | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 450.00 | |
| Full Name (Last, First, Middle Initial) Susan K. Brown | | | Date of Receipt |
| Mailing Address 917 Geneva St | | | 12 11 2009 |
| City Glendale | State CA | Zip Code 91207 | Transaction ID: 2010011316304-18 |
| FEC ID number of contributing federal political committee. | C | 31207 | Amount of Each Receipt this Period 58.13 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupatio Plant Ma | | |
| Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 1496.98 | |
| Full Name (Last, First, Middle Initial) Susan K. Brown | | | Date of Receipt |
| Mailing Address 917 Geneva St | | | 12 25 2009 |
| City Glendale | State CA | Zip Code 91207 | Transaction ID: 20100113163038-18 |
| FEC ID number of contributing federal political committee. | C | 91207 | Amount of Each Receipt this Period 58.13 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupatio Plant Ma | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 1496.98 |] |
| SUBTOTAL of Receipts This Page (options | al) | | 141.26 |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 15 / 87 (check only one) X |
|--|--|---|
| Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | and Statements may not be sold or used by any persong the name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Sebastian J. Bufalino Mailing Address 1091 Pine Meadow | v Ct | Date of Receipt |
| City Vernon Hills FEC ID number of contributing | State Zip Code IL 60061 | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-179 Amount of Each Receipt this Period |
| Name of Employer Baxter International Inc. Receipt For: Primary General | Occupation VP, Corporate Audit Aggregate Year-to-Date ▼ | 51.96 |
| Other (specify) ▼ Full Name (Last, First, Middle Initial) Sebastian J. Bufalino Mailing Address 1091 Pine Meadov | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Vernon Hills FEC ID number of contributing federal political committee. | State Zip Code IL 60061 | Transaction ID: 20100113163038-179 Amount of Each Receipt this Period 51.96 |
| Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) ▼ | Occupation VP, Corporate Audit Aggregate Year-to-Date 1341.84 | |
| Full Name (Last, First, Middle Initial) Donna Campagna Mailing Address 30922 St Andrews | Drive | Date of Receipt |
| City <u>Libertyville</u> FEC ID number of contributing federal political committee. | State Zip Code IL 60048 | Transaction ID: 2010011316304-38 Amount of Each Receipt this Period 40.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation VP, Information Technology Aggregate Year-to-Date ▼ 935.00 | |
| | nal) | 143.92 |

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from ror commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) Donna Campagna Mailing Address 30922 St Andrews Drive City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. VP, Information Technology Receipt For: Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Edward K, Chess Mailing Address 5313 Abbey Drive FUI Dumber of contributing federal political committee. C Date of Receipt Transaction ID: 20100113163038-3 Amount of Each Receipt this Period 40.00 Date of Receipt Transaction ID: 20100113163038-3 Amount of Each Receipt this Period FUI Name (Last, First, Middle Initial) Edward K, Chess Mailing Address 5313 Abbey Drive FUI Name (Last, First, Middle Initial) C Date of Receipt Transaction ID: 2010011316304-12 Amount of Each Receipt this Period Date of Receipt Transaction ID: 2010011316304-12 Amount of Each Receipt this Period FUI Name (Last, First, Middle Initial) Edward K, Chess Mailing Address 5313 Abbey Drive FUI Name (Last, First, Middle Initial) Edward K, Chess Mailing Address 5313 Abbey Drive | SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | () | Use separate schedule(s) for each category of the | FOR LINE NUMBER: PAGE 16 / 87 (check only one) |
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| NAME OF COMMITTEE (in Full) Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) Dona Campagna Malling Address 30922 St Andrews Drive City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. Full Name (Last, First, Middle Initial) Coccupation Receipt For: Primary General Other (specify) ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Coccupation State Zip Code Libertyville IL 60048 Transaction ID: 201001131850303-3 Amount of Each Receipt This Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 City State Zip Code Receipt Transaction ID: 20100113183034-12 Amount of Each Receipt This Period Transaction ID: 20100113183034-12 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183034-12 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183034-12 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183034-12 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183034-12 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183034-12 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183038-13 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183038-13 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183038-13 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183038-13 Amount of Each Receipt This Period Date of Receipt Transaction ID: 20100113183038-13 This Period This Period Date of Receipt This This Period Date of Receipt This This Period Date of Receipt This This This Period Date of Receipt This This This This Period Date of Receipt This This This This This This This This | | | , - | |
| Baxter Healthcare Political Action Committee | Any information copied from such Reports an or for commercial purposes, other than using | d Statements may the name and add | not be sold or used by any perso ress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Donna Campagna Mailing Address 30922 St Andrews Drive City State Zip Code Libertryville IL 60048 FEC ID number of contributing federal political committee. Name of Employer Baxler Healthcare Corpora- Ion Receipt For: Primary General Other (specify) ▼ State Zip Code IL 60048 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code IL 60050 Transaction ID: 20100113163038-3 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 FEC ID number of contributing federal political committee. C cucupation Sr Director, Research Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date of Receipt Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 FEC ID number of contributing federal political committee. C Date of Receipt Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 Transaction ID: 2010113163038-1 Amount of Each Receipt this Period Transaction ID: 2010113163038-1 Amount of Each Receipt this Period Transaction ID: 2010113163038-1 Amount of Each Receipt this Per | , , , | `ammittaa | | |
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| City State Zip Code IL 60048 FEC ID number of contributing federal political committee. C | | | | Date of Receipt |
| Transaction ID: 20100113163038-3 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Vame of Employer Bavter Healthcare Corporation City State Zip Code IL 60048 Date of Receipt Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 FEC ID number of contributing federal political committee. Vame of Employer Bavter Healthcare Corpora-Bavter He | Mailing Address 30922 St Andrews I | Drive | | |
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| Name of Employer Sate Parimary General Occupation Occupation Occupation Other (specify) ▼ | | <u>IL</u> | 60048 | Amount of Each Receipt this Period |
| Receipt For: | | C | | 40.00 |
| Receipt For: | | | | |
| Other (specify) ▼ 935.00 Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City McHenry IL 60050 FEC ID number of contributing federal political committee. Name of Employer Barker Healthcare Corporation Receipt For: Primary Other (specify) ▼ City State Zip Code IL 60050 Transaction ID: 2010011316304-12 Amount of Each Receipt this Period Ccupation Sr Director, Research Aggregate Year-to-Date ▼ Transaction ID: 2010011316304-12 Amount of Each Receipt this Period Date of Receipt Amount of Each Receipt this Period Date of Receipt Transaction ID: 20100113163034-12 Amount of Each Receipt this Period Ccupation Sr Director, Research Aggregate Year-to-Date ▼ Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Research Amount of Each Receipt this Period Ccupation Sr Director, Sc Direc | Receipt For: | | | |
| Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 FEC ID number of contributing federal political committee. Name of Employer Satter Healthcare Corporation Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 Transaction ID: 2010011316304-12 Aggregate Year-to-Date ▼ 12 25 1 1 1 2 2 0 0 9 Transaction ID: 20100113163038-1 Amount of Each Receipt M M M J D D D J V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | 0 0 | 935.00 | |
| Mailing Address 5313 Abbey Drive City McHenry IL 60050 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ City Mailing Address 5313 Abbey Drive City Name of Employer Baxter Healthcare Corporation Sr Director, Research Aggregate Year-to-Date ▼ Transaction ID: 2010011316304-12 Amount of Each Receipt this Period Date of Receipt M M M 12 11 1 1 2 0 0 9 Transaction ID: 2010011316304-12 Amount of Each Receipt this Period Date of Receipt M M M 12 2 0 0 9 Transaction ID: 20100113163038-1 Date of Receipt M M M 12 2 0 0 9 Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Date of Receipt M M M 12 2 0 0 9 Transaction ID: 20100113163038-1 Amount of Each Receipt this Period C 25.00 Name of Employer Baxter Healthcare Corporation Sr Director, Research Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ | | | | Date of Receipt |
| State Zip Code IL 60050 | | | | M M / D D / Y Y Y Y |
| McHenry FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code IL 60050 FCID number of contributing federal political committee. City State Zip Code II 650.00 | City | State | Zip Code | |
| Name of Employer Baxter Healthcare Corporation Sr Director, Research | McHenry | IL | 60050 | |
| Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | C | | 25.00 |
| Receipt For: Primary | | | | |
| Tull Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Cother (specify) ▼ Other (specify) ▼ Cother (specify) ▼ Date of Receipt Transaction ID: 20100113163038-1 Amount of Each Receipt this Period Cocupation Sr Director, Research Aggregate Year-to-Date ▼ Other (specify) ▼ Other (specify) ▼ | | | | |
| Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 20100113163038-1 Amount of Each Receipt this Period 25.00 Aggregate Year-to-Date ▼ 650.00 | | 1 1 | 650.00 | |
| Mailing Address 5313 Abbey Drive City State Zip Code IL 60050 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Occupation Sr Director, Research Aggregate Year-to-Date ▼ Page 100 12 2 0 0 9 12 2 0 0 9 Transaction ID: 20100113163038-1 Amount of Each Receipt this Period 25.00 | | l | | Date of Receipt |
| City McHenry IL 60050 Amount of Each Receipt this Period C Name of Employer Baxter Healthcare Corporation Receipt For: Primary Other (specify) ▼ State Zip Code IL 60050 C C C C C C C Amount of Each Receipt this Period 25.00 Amount of Each Receipt this Period C Aggregate Year-to-Date 650.00 | Mailing Address 5313 Abbey Drive | | | |
| FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Genome 650.00 | - | | Zip Code | Transaction ID: 20100113163038-12 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Occupation Sr Director, Research Aggregate Year-to-Date ▼ 650.00 | • | IL | 60050 | Amount of Each Receipt this Period |
| tion Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00 | | C | | 25.00 |
| Primary General Other (specify) ▼ 650.00 | tion | | | |
| Other (specify) ▼ 650.00 | | Aggregate | Year-to-Date ▼ | , |
| an nn | | | 650.00 | |
| | | | | 90.00 |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 17 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | and Statements may not be sold or used by any person ng the name and address of any political committee to a Committee | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Brian W. Clements Mailing Address 109 Juniper Way | | Date of Receipt |
| | | 12 11 2009 |
| City Lake Villa | State Zip Code IL 60046 | Transaction ID: 2010011316304-9 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 15.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: | Occupation VP, MD Supply Chain Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) | Aggregate Year-to-Date ▼ 270.00 | |
| Full Name (Last, First, Middle Initial) Brian W. Clements | L | Date of Receipt |
| Mailing Address 109 Juniper Way | | 1 2 2 5 2 0 0 9 |
| City | State Zip Code | Transaction ID: 20100113163038-9 |
| Lake Villa | IL 60046 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 15.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, MD Supply Chain | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |
| Full Name (Last, First, Middle Initial) Edward M. Conrad | | Date of Receipt |
| Mailing Address 113 S Waverly Pl | | 1 2 1 1 2 2 0 0 9 |
| City | State Zip Code | Transaction ID: 2010011316304-163 |
| Mt Prospect | IL 60056 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 64.50 |
| Name of Employer Baxter International Inc. | Occupation Dir, Tax | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1667.52 | |
| SUBTOTAL of Receints This Page (ontion | nal) | 94.50 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | , | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 18 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co | the name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Edward M. Conrad Mailing Address 113 S Waverly PI | | | Date of Receipt |
| City | State | Zip Code | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-163 |
| Mt Prospect FEC ID number of contributing federal political committee. | C | 60056 | Amount of Each Receipt this Period 64.50 |
| Name of Employer Baxter International Inc. | Occupation Dir, Tax | n | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 1667.52 | |
| Full Name (Last, First, Middle Initial) June C. Costello | | | Date of Receipt |
| Mailing Address 44 Longwood Dr | | | 12 11 2009 |
| City Clifton Park | State NY | Zip Code 12065 | Transaction ID: 2010011316304-48 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 10.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | | presentative I Year-to-Date ▼ 230.00 | |
| Full Name (Last, First, Middle Initial) June C. Costello Mailing Address 44 Longwood Dr | | | Date of Receipt |
| City Clifton Park | State NY | Zip Code 12065 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-47 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 10.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Sales Re | n presentative I | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 230.00 | |
| SUBTOTAL of Receipts This Page (optional) |) | | 84.50 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 19 / 87 (check only one) X 11a |
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| Any information copied from such Reports a | nd Statements may not be sold or used by any person the name and address of any political committee to | 13 14 15 16 |
| | g the name and address of any political committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | Committee | |
| Full Name (Last, First, Middle Initial) Sarah L. Creviston | | Date of Receipt |
| Mailing Address 23 Wynstone Way | | 12 11 2009 |
| City | State Zip Code | Transaction ID: 2010011316304-146 |
| North Barrington | IL 60010 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 103.21 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Government Affairs | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 2658.26 | |
| Full Name (Last, First, Middle Initial) Sarah L. Creviston | | Date of Receipt |
| Mailing Address 23 Wynstone Way | | 12 25 2009 |
| City | State Zip Code | Transaction ID: 20100113163038-14 |
| North Barrington | IL 60010 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 103.21 |
| Name of Employer Baxter Healthcare Corpora- | Occupation VP, Government Affairs | |
| tion Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 2658.26 | |
| Full Name (Last, First, Middle Initial) Margarita Cruz-casse | I | Date of Receipt |
| Mailing Address Calle Guama #70 | Mansiones Los Cedr | 12 11 2009 |
| City | State Zip Code | Transaction ID: 2010011316304-196 |
| Cayey | PR 00736 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 50.08 |
| Name of Employer Baxter | Occupation Dir, Logistics | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 1287.80 | |
| | al) | 256.50 |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | Use separate school for each category Detailed Summan | of the |
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| Any information copied from such Reports a or for commercial purposes, other than usin | and Statements may not be sold or used light the name and address of any political controls. | by any person for the purpose of soliciting contributions committee to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | Committee | |
| Full Name (Last, First, Middle Initial) Margarita Cruz-casse | | Date of Receipt |
| Mailing Address Calle Guama #70 | Mansiones Los Cedr | 12 25 2009 |
| City Cayey | State Zip Code PR 00736 | Transaction ID: 20100113163038-19 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 50.08 |
| Name of Employer Baxter | Occupation Dir, Logistics | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 87.80 |
| Full Name (Last, First, Middle Initial) Robert M. Davis | | Date of Receipt |
| Mailing Address 21515 Hummingb | rd Court | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Kildeer | State Zip Code IL 60047 | Transaction ID: 2010011316304-167 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 167.31 |
| Name of Employer Baxter International Inc. | Occupation Cvp, CFO | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 26.98 |
| Full Name (Last, First, Middle Initial) Robert M. Davis | I | Date of Receipt |
| Mailing Address 21515 Hummingb | rd Court | M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y |
| City Kildeer | State Zip Code IL 60047 | Transaction ID: 20100113163038-16 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 167.31 |
| Name of Employer Baxter International Inc. | Occupation Cvp, CFO | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 26.98 |
| SUBTOTAL of Receipts This Page (option | al) | 384.70 |

SCHEDULE A (FEC Form 3X)

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 21 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11 |
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| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor | e name and addres | ot be sold or used by any persons of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Scot J. Deathos Mailing Address 28461 Hidden Hills Black City Saugus FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State CA C Occupation Plant Mgr li Aggregate Ye | Zip Code 91390 par-to-Date ▼ 969.98 | Date of Receipt M M M |
| Full Name (Last, First, Middle Initial) Scot J. Deathos Mailing Address 28461 Hidden Hills Blue City Saugus FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State CA C Occupation Plant Mgr li Aggregate Ye | Zip Code 91390 ear-to-Date ▼ 969.98 | Date of Receipt M |
| Full Name (Last, First, Middle Initial) Scott A. Ehrmantraut Mailing Address 42495 West Heavenly City Maricopa FEC ID number of contributing federal political committee. Name of Employer BioLife Plasma L.L.C. Receipt For: Primary General Other (specify) | State AZ C Occupation Director, Op Aggregate Ye | | Date of Receipt M M D D 2009 Transaction ID: 2010011316304-193 Amount of Each Receipt this Period 50.00 |
| SUBTOTAL of Receipts This Page (optional) | |) | 125.44 |

| SCHEDULE A (FITEMIZED RECE | EIPTS om such Reports and Statements m | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 22 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions |
|--|--|---|--|
| or for commercial purpos NAME OF COMMITT | es, other than using the name and a | address of any political committee to | solicit contributions from such committee. |
| Full Name (Last, First Scott A. Ehrmantraut Mailing Address 42 | , Middle Initial) 495 West Heavenly Place | | Date of Receipt |
| City | State | Zip Code | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-193 |
| <u>Maricopa</u> | AZ | 85238 | Amount of Each Receipt this Period |
| FEC ID number of confederal political comm | | | 50.00 |
| Name of Employer BioLife Plasma L.L.C. | Directo | r, Operations | |
| Receipt For: Primary Other (specify) | General | ate Year-to-Date ▼ 400.00 | |
| Full Name (Last, First Paul D. Estrem | , Middle Initial) | | Date of Receipt |
| Mailing Address 32 | 5 Clarewood Circle | | 12 11 2009 |
| Cravalaka | State | Zip Code | Transaction ID: 2010011316304-46 |
| Grayslake FEC ID number of core federal political committee in the committ | | 60030 | Amount of Each Receipt this Period 50.00 |
| Name of Employer Baxter Healthcare Contion | rpora- Occupat VP, Fir | tion 1 & Strat Initiatives | |
| Receipt For: Primary Other (specify) | General | ate Year-to-Date ▼ 1300.00 | |
| Full Name (Last, First Paul D. Estrem | , Middle Initial) | | Date of Receipt |
| Mailing Address 32 | 5 Clarewood Circle | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City <u>Graysla</u> ke | State IL | Zip Code 60030 | Transaction ID: 20100113163038-45 Amount of Each Receipt this Period |
| FEC ID number of cor federal political comm | | | 50.00 |
| Name of Employer Baxter Healthcare Col tion | rpora- Occupat VP, Fir | tion n & Strat Initiatives | |
| Receipt For: Primary Other (specify) | General | ate Year-to-Date ▼ 1300.00 | |
| SUBTOTAL of Receipts | This Page (optional) | | 150.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 23 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|--|----------------------------|---|--|
| Any information copied from such Reports and St or for commercial purposes, other than using the | atements ma name and ad | y not be sold or used by any perso dress of any political committee to | |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com | mittee | | |
| Full Name (Last, First, Middle Initial) Peter Etienne | | | Date of Receipt |
| Mailing Address 189 Lions Court | | | M M / D D / Y Y Y Y Y Y 1 1 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 2010011316304-170 |
| Lake Zurich | <u> </u> | 60047 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Baxter International Inc. | Occupatio Sr Couns | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 650.00 | |
| Full Name (Last, First, Middle Initial) | | | Date of Descript |
| Peter Etienne Mailing Address 189 Lions Court | | | Date of Receipt 1 2 2 5 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 20100113163038-1 |
| Lake Zurich FEC ID number of contributing federal political committee. | C | 60047 | Amount of Each Receipt this Period 25.00 |
| Name of Employer Baxter International Inc. | Occupatio Sr Couns | | |
| Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 650.00 | |
| Full Name (Last, First, Middle Initial) Camille I. Farhat | | | Date of Receipt |
| Mailing Address 1052 Warrington Road | | | 1 2 1 1 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 2010011316304-64 |
| Deerfield | <u> </u> | 60015 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupatio GM, Bpt | n | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 1300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 100.00 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 24 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | d Statements may not be sold or used by any person the name and address of any political committee to sommittee | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Camille I. Farhat Mailing Address 1052 Warrington Ro | pad | Date of Receipt 1 2 2 5 2 0 0 9 |
| City Deerfield | State Zip Code IL 60015 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-63 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | Occupation | 50.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | GM, Bpt Aggregate Year-to-Date ▼ 1300.00 | |
| Full Name (Last, First, Middle Initial) Jack M. Fisher Mailing Address 9678 RESTON LAN | E | Date of Receipt |
| City MCCORDSVILLE FEC ID number of contributing federal political committee. | State Zip Code IN 46055 | Transaction ID: 2010011316304-28 Amount of Each Receipt this Period 10.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation Dir, National Accounts Aggregate Year-to-Date 220.00 | |
| Full Name (Last, First, Middle Initial) Jack M. Fisher Mailing Address 9678 RESTON LAN | | Date of Receipt |
| City MCCORDSVILLE | State Zip Code IN 46055 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-28 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 10.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General | Occupation Dir, National Accounts Aggregate Year-to-Date | |
| Other (specify) ▼ SUBTOTAL of Receipts This Page (optional |) | 70.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 25 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|---|---|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the | tatements may not be sold or used by any per name and address of any political committee | |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com | nmittee | |
| Full Name (Last, First, Middle Initial) Alan E. Freedlund | | Date of Receipt |
| Mailing Address 746 S. River Rd | | 12 11 2009 |
| City | State Zip Code | Transaction ID: 2010011316304-80 |
| Naperville | IL 60540 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 12.00 |
| Name of Employer Baxter Healthcare Corpora- | Occupation VP, Information Technology | |
| tion Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 276.00 | |
| Full Name (Last, First, Middle Initial) Alan E. Freedlund | <u> </u> | Date of Receipt |
| Mailing Address 746 S. River Rd | | 1 2 2 5 2 0 0 9 |
| City | State Zip Code | Transaction ID: 20100113163038-7 |
| <u>Naperville</u> | IL 60540 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 12.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Information Technology | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 276.00 | |
| Full Name (Last, First, Middle Initial) Kevin E. Freeman | | Date of Receipt |
| Mailing Address 20982 Buffalo Run | | 12 11 2009 |
| City | State Zip Code | Transaction ID: 2010011316304-16 |
| Kildeer | IL 60047 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Baxter International Inc. | Occupation VP, I Finance | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 650.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 49.00 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 26 / 87 (check only one) X 11a 11b 11c 12 |
|--|--|--|
| Any information copied from such Reports ar or for commercial purposes, other than using | nd Statements may not be sold or used by any personal the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (| Committee | |
| Full Name (Last, First, Middle Initial) Kevin E. Freeman | | Date of Receipt |
| Mailing Address 20982 Buffalo Run | 0 to 1 7 to 1 to | 12 25 2009 |
| City Kildeer | State Zip Code IL 60047 | Transaction ID: 20100113163038-164 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Baxter International Inc. | Occupation VP, I Finance | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 650.00 | |
| Full Name (Last, First, Middle Initial) Valery E. Gallagher | | Date of Receipt |
| Mailing Address 14334 Spring Mead | low Court | M M / D D / Y Y Y Y Y 1 1 2 0 0 9 |
| City | State Zip Code | Transaction ID: 2010011316304-71 |
| Green Oaks | IL 60048 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 71.93 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, State Government Affairs | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 1848.82 | |
| Full Name (Last, First, Middle Initial) Valery E. Gallagher | | Date of Receipt |
| Mailing Address 14334 Spring Meac | low Court | 12 25 YYYY 12 25 2009 |
| City | State Zip Code | Transaction ID: 20100113163038-70 |
| Green Oaks | IL 60048 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 71.93 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, State Government Affairs | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1848.82 | |
| OUDTOTAL of Descripto This Description | J) | 168.86 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | Use separate schedule(s for each category of the Detailed Summary Page | X 11a 11b 11c 12 |
|---|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using | d Statements may not be sold or used by any the name and address of any political commit | person for the purpose of soliciting contributions tee to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | | |
| Full Name (Last, First, Middle Initial) Erin M. Gardiner | | Date of Receipt |
| Mailing Address 2442 W. Carmen Av | /e. | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 2010011316304-16 |
| Chicago | IL 60625 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Baxter International Inc. | Occupation Dir, Communications | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 450.00 | 0) 0 |
| Full Name (Last, First, Middle Initial) Erin M. Gardiner | | Date of Receipt |
| Mailing Address 2442 W. Carmen Av | /e. | 12 25 2009 |
| City | State Zip Code | Transaction ID: 20100113163038-1 |
| Chicago | IL 60625 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Baxter International Inc. | Occupation Dir, Communications | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |
| Full Name (Last, First, Middle Initial) James M. Gatling | | Date of Receipt |
| Mailing Address 391 Sherbrooke Cou | urt | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 2010011316304-16 |
| Crystal Lake | IL 60012 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 156.54 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Cvp, Global Manufacturing Ops | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 4050.04 | 1 |
| | | 206.54 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 28 / 87 (check only one) X |
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| or for commercial purposes, other than using NAME OF COMMITTEE (In Full) | nd Statements may not be sold or used by any persor g the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Baxter Healthcare Political Action (| Committee | |
| Full Name (Last, First, Middle Initial) James M. Gatling | | Date of Receipt |
| Mailing Address 391 Sherbrooke Co | ourt | 12 25 2009 |
| City | State Zip Code | Transaction ID: 20100113163038-16 |
| Crystal Lake | IL 60012 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 156.54 |
| Name of Employer Baxter Healthcare Corpora- | Occupation | |
| tion | Cvp, Global Manufacturing Ops | 4 |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 4050.04 | |
| Full Name (Last, First, Middle Initial) Arthur J. Gibson | I | Date of Receipt |
| Mailing Address 3775 Riverly Trace | | 1 2 1 1 2 2 0 0 9 |
| City | State Zip Code | Transaction ID: 2010011316304-60 |
| <u>Marietta</u> | GA 30067 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 53.17 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Environ, Health & Safety | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1367.24 | |
| Full Name (Last, First, Middle Initial) Arthur J. Gibson | | Date of Receipt |
| Mailing Address 3775 Riverly Trace |) | 1 2 2 5 2 0 0 9 |
| City | State Zip Code | Transaction ID: 20100113163038-59 |
| <u>Marietta</u> | GA 30067 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 53.17 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Environ, Health & Safety | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1367.24 | |
| SUBTOTAL of Receipts This Page (options | al) | 262.88 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 29 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|---|--------------------------|---|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the | tatements may | not be sold or used by any persodress of any political committee to | |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com | nmittee | | |
| Full Name (Last, First, Middle Initial) Susan C. Gould | | | Date of Receipt |
| Mailing Address 760 Oakwood Ave | | | M M / D D / Y Y Y Y Y Y 1 Y 1 1 1 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 2010011316304-112 |
| Lake Forest | IL | 60045 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- | Occupation | n Iinical Development | |
| tion Receipt For: | | Year-to-Date V | _ |
| Primary General Other (specify) ▼ | 7.39.09410 | 450.00 | |
| Full Name (Last, First, Middle Initial) Susan C. Gould | <u> </u> | | Date of Receipt |
| Mailing Address 760 Oakwood Ave | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 20100113163038-1 |
| Lake Forest | IL | 60045 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Sr Dir, C | n Iinical Development | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 450.00 | |
| Full Name (Last, First, Middle Initial) William J. Gresham | | | Date of Receipt |
| Mailing Address 909 Clinton Place | | | 1 2 1 1 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 2010011316304-18 |
| River Forest | IL | 60305 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Baxter International Inc. | Occupation Dir, Ethic | n cs & Compliance/Ehs | |
| Receipt For: Primary General Other (specify) | | Year-to-Date ▼ 650.00 | |
| SUBTOTAL of Receipts This Page (optional) | I | | 125.00 |

| SCHEDULE A (FEC | • | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 30 / 8 / (check only one) |
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| or for commercial purposes, ot | her than using the name and a | ay not be sold or used by any persiddress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (I Baxter Healthcare Polit | • | | |
| Full Name (Last, First, Midd William J. Gresham | lle Initial) | | Date of Receipt |
| Mailing Address 909 Cli | nton Place | | M M / D D / Y Y Y Y |
| City River Forest | State IL | Zip Code 60305 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-18 Amount of Each Receipt this Period |
| FEC ID number of contributed federal political committee. | ting C | | 25.00 |
| Name of Employer Baxter International Inc. | Occupati Dir, Eth | ion ics & Compliance/Ehs | |
| Receipt For: Primary Ger Other (specify) ▼ | Aggrega | te Year-to-Date ▼ 650.00 | |
| Full Name (Last, First, Midd Andrew C. Hayes | lle Initial) | | Date of Receipt |
| Mailing Address 1620 T | mber Woods Lane | | 12 11 2009 |
| City | State | Zip Code | Transaction ID: 2010011316304-87 |
| <u>Libertyville</u> FEC ID number of contribu federal political committee. | IL C | 60048 | Amount of Each Receipt this Period 64.22 |
| Name of Employer Baxter Healthcare Corpora- | Occupati | on Marketing | |
| tion Receipt For: Primary Ger Other (specify) ▼ | | te Year-to-Date 1658.14 | |
| Full Name (Last, First, Midd Andrew C. Hayes | lle Initial) | | Date of Receipt |
| · | mber Woods Lane | | 1 2 2 5 2 0 0 9 |
| City Libertyville | State | Zip Code | Transaction ID: 20100113163038-86 |
| FEC ID number of contributed rederal political committee. | ing C | 60048 | Amount of Each Receipt this Period 64.22 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupati Sr Dir, I | on Marketing | |
| Receipt For: Primary Ger Other (specify) ▼ | Aggrega | te Year-to-Date ▼ 1658.14 | |
| SUBTOTAL of Receipts This | Page (optional) | | 153.44 |

| | HEDULE A (FEC Form 3X) MIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 31 / 8 / (check only one) X 11a |
|--------|--|----------------------|--|---|
| or fo | information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co | e name and ad | y not be sold or used by any person dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | Full Name (Last, First, Middle Initial) | | | |
| - | Mark A. Heidersbach Mailing Address 9329 Sayre Avenue | | | Date of Receipt |
| - | · | | | 12 15 2009 |
| | City Morton Grove | State IL | Zip Code 60053-1229 | Transaction ID: 0D60748EE5B601716 Amount of Each Receipt this Period |
| - F | EC ID number of contributing ederal political committee. | С | | 500.00 |
| | Name of Employer Baxter Healthcare Corpora- ion | Occupatio AVP, Cc | | |
| Ī | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 500.00 | |
| | Full Name (Last, First, Middle Initial) Leslie J. Herzog | -1 | | Date of Receipt |
| ľ | Mailing Address 816 Moseley Rd. | | | 12 11 2009 |
| | Dity | State | Zip Code | Transaction ID: 2010011316304-119 |
| - | Highland Park | <u>IL</u> | 60035 | Amount of Each Receipt this Period |
| | FEC ID number of contributing ederal political committee. | С | | 31.69 |
| | Name of Employer Baxter Healthcare Corpora- | Occupatio | on ical Data Mgmt | |
| | ion Receipt For: | | e Year-to-Date | |
| | Primary General Other (specify) ▼ | | 602.11 | |
| | Full Name (Last, First, Middle Initial) Leslie J. Herzog | | | Date of Receipt |
| ľ | Mailing Address 816 Moseley Rd. | | | 12 25 2009 |
| | Dity | State | Zip Code | Transaction ID: 20100113163038-11 |
| _ | Highland Park | <u>IL</u> | 60035 | Amount of Each Receipt this Period |
| f | FEC ID number of contributing ederal political committee. | С | | 31.69 |
| 1 | Name of Employer Baxter Healthcare Corpora- ion | | ical Data Mgmt | |
| ŀ | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | 7 |
| | Other (specify) ▼ | 0 0 | 602.11 | |
| | BTOTAL of Receipts This Page (optional) . | | | 563.38 |

| Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | Statements mag | Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 |
|--|-------------------------------|---|---|
| NAME OF COMMITTEE (In Full) | statements mag name and ad | | |
| NAME OF COMMITTEE (In Full) | | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Devian Healthean Delice of Accion | | | |
| Baxter Healthcare Political Action Con | nmittee | | |
| Full Name (Last, First, Middle Initial) Robert J. Hombach | | | Date of Receipt |
| Mailing Address 126 Homewood Avenu | ie | | 12 11 2009 |
| City | State | Zip Code | Transaction ID: 2010011316304-165 |
| Libertyville | IL | 60048 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Baxter International Inc. | Occupatio | | 7 |
| | Cvp, Tre | | |
| Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | 1 |
| Other (specify) ▼ | 0 0 | 650.00 | |
| Full Name (Last, First, Middle Initial) Robert J. Hombach | | | Date of Receipt |
| Mailing Address 126 Homewood Avenu | ie | | M M / D D / Y Y Y Y |
| City | State | Zip Code | 12 25 2009 |
| Libertyville | IL | 60048 | Transaction ID: 20100113163038-16 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Baxter International Inc. | Occupatio Cvp, Tre | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 650.00 | |
| Full Name (Last, First, Middle Initial) Gary W. Inglese | | | Date of Receipt |
| Mailing Address 9321 Waterside Court | | | 1 2 1 1 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 2010011316304-72 |
| New Haven | IN | 46774 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 20.00 |
| Name of Employer Baxter Healthcare Corpora- | Occupatio | n thcare Reimb | 7 |
| tion Receipt For: | , ' | e Year-to-Date ▼ | _ |
| Primary General Other (specify) ▼ | 55 153.00 | 520.00 |] |
| SUBTOTAL of Receipts This Page (optional) | | | 70.00 |

| SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS |) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 33 / 87 (check only one) X 11a 11b 11c 12 |
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| Any information copied from such Reports and or for commercial purposes, other than using the commercial purposes. | d Statements may | y not be sold or used by any persortress of any political committee to | 13 14 15 16 16 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19 |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co | | areas of any pointed committee to | |
| Full Name (Last, First, Middle Initial) Gary W. Inglese | | | Date of Receipt |
| Mailing Address 9321 Waterside Cou | ırt | | 1 2 2 5 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 20100113163038-7 |
| New Haven | IN | 46774 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 20.00 |
| Name of Employer Baxter Healthcare Corpora- | Occupation | | |
| tion Receipt For: | - | thcare Reimb | \dashv |
| Primary General | Aggregate | e Year-to-Date ▼ | 7 |
| Other (specify) | | 520.00 | |
| Full Name (Last, First, Middle Initial) Irene P. Jakimcius | 1 | | Date of Receipt |
| Mailing Address 2208 Wesley Ave. | | | 12 11 2009 |
| City | State | Zip Code | Transaction ID: 2010011316304-17 |
| Evanston | IL | 60201 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 81.99 |
| Name of Employer Baxter International Inc. | Occupation Assoc G | n eneral Counsel | 7 |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 2113.98 | |
| Full Name (Last, First, Middle Initial) Irene P. Jakimcius | | | Date of Receipt |
| Mailing Address 2208 Wesley Ave. | | | 12 25 2009 |
| City | State | Zip Code | Transaction ID: 20100113163038-1 |
| Evanston | IL | 60201 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 81.99 |
| Name of Employer Baxter International Inc. | Occupation Assoc Go | n eneral Counsel | 7 |
| Receipt For: | Aggregate | e Year-to-Date 🔻 | |
| Primary General Other (specify) ▼ | 0 0 | 2113.98 | |
| | | | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule for each category of the Detailed Summary Pag | (crieck only one) |
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| or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | name and address of any political comm | y person for the purpose of soliciting contributions ittee to solicit contributions from such committee. |
| Baxter Healthcare Political Action Con | mittee | |
| Full Name (Last, First, Middle Initial) Michael T. Jennings | | Date of Receipt |
| Mailing Address 130 W Lincoln Ave | | 12 11 2009 |
| City | State Zip Code | Transaction ID: 2010011316304-14 |
| Libertyville | IL 60048 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 38.46 |
| Name of Employer Baxter Healthcare Corpora- | Occupation | |
| tion | Sr Dir, Strategy & Integration | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) | 346.1 | 4 |
| Full Name (Last, First, Middle Initial) | | Date of Possint |
| Michael T. Jennings Mailing Address 130 W Lincoln Ave | | Date of Receipt |
| City | State Zip Code | 12 25 2009 |
| City Libertyville | IL 60048 | Transaction ID: 20100113163038-14 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 38.46 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Sr Dir, Strategy & Integration | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 346.1 | 4 |
| Full Name (Last, First, Middle Initial) Robert A. Johnson | | Date of Receipt |
| Mailing Address 31385 W Somerset Ci | cle | 12 11 2009 |
| City | State Zip Code | Transaction ID: 2010011316304-45 |
| Green Oaks | IL 60048 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP Ii, Manufacturing | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.0 | 0 |
| SUBTOTAL of Receipts This Page (optional) | | 101.92 |

| Full Name (Robert A. Jo Mailing Add City Green Oa FEC ID nur federal polit Name of En Baxter Heal tion Receipt For Prima Other Full Name (Rob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of En Baxter Heal tion Receipt For Prima Other Full Name (Rob C. Keel Other | COMMITTEE (In Full) calthcare Political Action Cor (Last, First, Middle Initial) chnson dress 31385 W Somerset Ci caks mber of contributing dical committee. mployer lithcare Corpora- r: ary General r (specify) (Last, First, Middle Initial) ey dress 22606 Bridle mber of contributing dical committee. | State IL Occupation VP Ii, Ma | Zip Code 60048 | Date of Receipt Date of Receipt Transaction ID: 2010011316303 Amount of Each Receipt this Period Date of Receipt Date of Receipt |
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| Full Name (Robert A. Jo Mailing Add City Green Oa FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other Name of Er Bob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other | ealthcare Political Action Cor (Last, First, Middle Initial) chress 31385 W Somerset Co aks mber of contributing cical committee. mployer Ithcare Corpora- r: ary General (specify) (Last, First, Middle Initial) (ey) dress 22606 Bridle | State IL C Occupation VP Ii, Ma Aggregate State IL C | 60048 n nufacturing Year-to-Date ▼ 450.00 Zip Code | Transaction ID: 2010011316303 |
| Robert A. Jo Mailing Add City Green Oa FEC ID nur federal polit Name of En Baxter Heal tion Receipt For Prima Other Full Name (Rob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of En Baxter Heal tion Receipt For Prima Other | chnson dress 31385 W Somerset Comparison dress 31385 W Somerset Comparison dress 31385 W Somerset Comparison dress 21385 W Somerset Comparison dress 31385 W Somerset Comparison | State IL C Occupation VP Ii, Ma Aggregate State IL C | 60048 n nufacturing Year-to-Date ▼ 450.00 Zip Code | Transaction ID: 2010011316303 |
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| Green Oa FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Other Full Name (Rob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other | mber of contributing tical committee. mployer lithcare Corpora- r: ary General r (specify) (Last, First, Middle Initial) ey dress 22606 Bridle mber of contributing tical committee. | Occupation VP Ii, Ma Aggregate State IL C | 60048 n nufacturing Year-to-Date ▼ 450.00 Zip Code | Date of Receipt Date of Receipt 1 2 1 1 2 2 0 0 5 Transaction ID: 2010011316304 Amount of Each Receipt this Period |
| FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Other Full Name (Rob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other | mber of contributing tical committee. mployer lithcare Corpora- r: ary General r (specify) (Last, First, Middle Initial) ey dress 22606 Bridle mber of contributing tical committee. | C Occupation VP Ii, Ma Aggregate State IL | nunufacturing Year-to-Date ▼ 450.00 Zip Code | Date of Receipt M M M / D D M Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name of Er Baxter Heal tion Receipt For Other Full Name (Rob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other Full Name (Rob C. Keel Mailing Add City Kildeer) | mployer lithcare Corpora- r: ary General r (specify) (Last, First, Middle Initial) ley dress 22606 Bridle mber of contributing tical committee. | Occupation VP Ii, Ma Aggregate State IL C | nufacturing Year-to-Date ▼ 450.00 Zip Code | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Receipt For Prima Other Full Name (Rob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other | General (specify) ▼ (Last, First, Middle Initial) ey dress 22606 Bridle mber of contributing tical committee. | VP li, Ma Aggregate State IL | nufacturing Year-to-Date ▼ 450.00 Zip Code | Transaction ID: 2010011316304 Amount of Each Receipt this Period |
| Full Name (Rob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of En Baxter Heal tion Receipt For Prima Other | ary General r (specify) ▼ (Last, First, Middle Initial) ey dress 22606 Bridle mber of contributing tical committee. | Aggregate State IL C | Year-to-Date ▼ 450.00 Zip Code | Transaction ID: 2010011316304 Amount of Each Receipt this Period |
| Full Name (Rob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of En Baxter Heal tion Receipt For Prima Other | ary General r (specify) ▼ (Last, First, Middle Initial) ey dress 22606 Bridle mber of contributing tical committee. | State IL C | 450.00 Zip Code | Transaction ID: 2010011316304 Amount of Each Receipt this Period |
| Rob C. Keel Mailing Add City Kildeer FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other Full Name (Rob C. Keel | dress 22606 Bridle mber of contributing tical committee. | C | • | Transaction ID: 2010011316304 Amount of Each Receipt this Period |
| City Kildeer FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other Full Name (Rob C. Keel | mber of contributing tical committee. | C | • | Transaction ID: 2010011316304 Amount of Each Receipt this Period |
| Kildeer FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other Full Name (Rob C. Keel | tical committee. | C | • | Transaction ID: 2010011316304 Amount of Each Receipt this Period |
| Kildeer FEC ID nur federal polit Name of Er Baxter Heal tion Receipt For Prima Other Full Name (Rob C. Keel | tical committee. | C | 60047 | Amount of Each Receipt this Period |
| Name of Er Baxter Heal tion Receipt For Other Full Name (Rob C. Keel | tical committee. | | | 50.00 |
| tion Receipt For Prima Other Full Name (Rob C. Keel | mplover | Occupation | | |
| Receipt For Prima Other Full Name (Rob C. Keel | Ithcare Corpora- | | n Prrt Marketing | |
| Rob C. Keel | | Aggregate | Year-to-Date ▼ 1294.12 | |
| | (Last, First, Middle Initial) | | | Date of Receipt |
| | dress 22606 Bridle | | | 1 2 2 5 2 0 0 S |
| City | | State | Zip Code | Transaction ID: 2010011316303 |
| Kildeer | | <u>IL</u> | 60047 | Amount of Each Receipt this Period |
| | mber of contributing ical committee. | C | | 50.00 |
| Name of En Baxter Heal tion | mployer Ithcare Corpora- | Occupation VP, Hd/C | n Errt Marketing | |
| Receipt For | | Aggregate | Year-to-Date ▼ | |
| Prima Other | • | 0 0 | 1294.12 | |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | 3X) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 36 / 87 (check only one) X |
|--|-----------------------|---|---|
| Any information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | ng the name and addre | ot be sold or used by any persons of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Jane E. Kiernan Mailing Address 525 West Roscoe | #OM | | Date of Receipt |
| City Chicago | State | Zip Code 60657-3540 | Transaction ID: 2010011316304-36 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 40.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ | - ' - | anager, Iv Therapy ear-to-Date ▼ 2040.00 | |
| Full Name (Last, First, Middle Initial) Jane E. Kiernan Mailing Address 525 West Roscoe | e , #3W | | Date of Receipt 1 2 2 5 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 20100113163038-36 |
| Chicago FEC ID number of contributing federal political committee. | C | 60657-3540 | Amount of Each Receipt this Period 40.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | | anager, Iv Therapy ear-to-Date ▼ 2040.00 | |
| Full Name (Last, First, Middle Initial) Richard L. Kirkendall | | | Date of Receipt |
| Mailing Address One Baxter Parkv | vay | | 12 11 2009 |
| City | State | Zip Code | Transaction ID: 2010011316304-131 |
| Deerfield FEC ID number of contributing federal political committee. | C | 60015 | Amount of Each Receipt this Period 75.00 |
| Name of Employer Baxter Healthcare Corpora- tion | - ' ' | Medication Delivery | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Y | ear-to-Date ▼ 675.00 | |
| SUBTOTAL of Receipts This Page (option | nal) | | 155.00 |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 37 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|----------|---|--|--|
| Ar | ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Con | tatements may not be sold or used by any persename and address of any political committee to | son for the purpose of soliciting contributions o solicit contributions from such committee. |
| \angle | Full Name (Last, First, Middle Initial) | millee | |
| Α. | Richard L. Kirkendall Mailing Address One Baxter Parkway | | Date of Receipt 1 2 2 5 2 0 0 9 |
| | City Deerfield | State Zip Code IL 60015 | Transaction ID: 20100113163038-131 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 75.00 |
| | Name of Employer Baxter Healthcare Corporation Receipt For: Primary General | Occupation VP Quality,Medication Delivery Aggregate Year-to-Date ▼ | |
| | Other (specify) ▼ | 675.00 | |
| 3. | Full Name (Last, First, Middle Initial) Marie G. Kissel Mailing Address 1 Baxter Pkwy c/o Ger | ald Loma | Date of Receipt |
| | C/O Gerald Lema | | 12 11 2009 |
| | City Deerfield | State Zip Code IL 60015 | Transaction ID: 2010011316304-182 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 76.46 |
| | Name of Employer Baxter World Trade Corpor- ation | Occupation Away on Assignment | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1976.74 | |
| ;. | Full Name (Last, First, Middle Initial) Marie G. Kissel | | Date of Receipt |
| | Mailing Address 1 Baxter Pkwy c/o Ger C/O Gerald Lema | | 12 25 7 2009 |
| | City Deerfield | State Zip Code IL 60015 | Transaction ID: 20100113163038-182 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 76.46 |
| | Name of Employer Baxter World Trade Corpor- ation | Occupation Away on Assignment | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1976.74 | |
| | | | 227.92 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 38 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11 |
|---|---|--|
| Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | d Statements may not be sold or used by any personant the name and address of any political committee to ommittee | on for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) John J. Kody Mailing Address 330 Brampton Coun City Lake Forest FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- | State Zip Code IL 60045 C Occupation | Date of Receipt M M M |
| Receipt For: Primary Other (specify) | VP, Sales & Marketing Aggregate Year-to-Date ▼ 260.00 | |
| Full Name (Last, First, Middle Initial) John J. Kody Mailing Address 330 Brampton Cour | t | Date of Receipt 1 2 2 5 2 0 0 9 |
| City <u>Lake Forest</u> FEC ID number of contributing federal political committee. | State Zip Code IL 60045 | Transaction ID: 20100113163038-67 Amount of Each Receipt this Period 10.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ | Occupation VP, Sales & Marketing Aggregate Year-to-Date 260.00 | |
| Full Name (Last, First, Middle Initial) Edward L. Lamb Mailing Address 1072 South Rockwe | St | Date of Receipt |
| City Gilbert FEC ID number of contributing | State Zip Code AZ 85296 | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-39 Amount of Each Receipt this Period 10.00 |
| rederal political committee. Name of Employer Baxter Healthcare Corporation | Occupation Dir, Information Technology | |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ 260.00 | |
| SUBTOTAL of Receipts This Page (optional |) | 30.00 |

| SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS | 3) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 39 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports and or for commercial purposes, other than using | d Statements may the name and add | not be sold or used by any perso lress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | committee | | |
| Full Name (Last, First, Middle Initial) Edward L. Lamb | | | Date of Receipt |
| Mailing Address 1072 South Rockwe | ell St | | 12 25 2009 |
| City | State | Zip Code | Transaction ID: 20100113163038-39 |
| Gilbert | AZ | 85296 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 10.00 |
| Name of Employer Baxter Healthcare Corpora- | Occupation | | |
| tion Receipt For: | | mation Technology | _ |
| Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 260.00 |] |
| Full Name (Last, First, Middle Initial) Edward (Ted) A. Langan | 1 | | Date of Receipt |
| Mailing Address 450 East Waterside Unit 1702 | Drive Unit 170 | 2 | 12 11 2009 |
| City | State | Zip Code | Transaction ID: 2010011316304-3 |
| Chicago | IL | 60601 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 75.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP Ii, Sal | | |
| Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 1950.00 | |
| Full Name (Last, First, Middle Initial) Edward (Ted) A. Langan | | | Date of Receipt |
| Mailing Address 450 East Waterside Unit 1702 | Drive Unit 170 | 2 | 12 25 2009 |
| City | State | Zip Code | Transaction ID: 20100113163038-3 |
| Chicago | <u>IL</u> | 60601 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 75.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP Ii, Sal | | |
| Receipt For: | Aggregate | Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 1950.00 |] |
| | | | 160.00 |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS |) | Use separate schedule(s) for each category of the | FOR LINE NUMBER: PAGE 40 / 87 (check only one) |
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| | | Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 |
| Any information copied from such Reports and or for commercial purposes, other than using t | d Statements may he name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| Baxter Healthcare Political Action Co | ommittee | | |
| Full Name (Last, First, Middle Initial) Timothy P. Lawrence | | | Date of Receipt |
| Mailing Address 876 Writer CT | | | 12 11 2009 |
| City | State | Zip Code | Transaction ID: 2010011316304-14 |
| Vernon Hills | IL | 60061 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 58.10 |
| Name of Employer Baxter Healthcare Corpora- | Occupation | n | ┥ |
| tion | VP Manu | rfacturing Med Delivery | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | _ |
| Primary General Other (specify) ▼ | | 1490.86 | |
| Full Name (Last, First, Middle Initial) Timothy P. Lawrence | | | Date of Receipt |
| Mailing Address 876 Writer CT | | | 12 25 2009 |
| City | State | Zip Code | Transaction ID: 20100113163038-1 |
| Vernon Hills | <u> </u> | 60061 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 58.10 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP Manu | n Ifacturing Med Delivery | 7 |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 1490.86 | |
| Full Name (Last, First, Middle Initial) Jacopo Leonardi | | | Date of Receipt |
| Mailing Address 319 E. Vincent Ct. | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 2010011316304-12 |
| Lake Bluff | <u>IL</u> | 60044 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Sr Dir, M | | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 550.00 | |
| | | | 141.20 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 41/8/ (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | d Statements may not be sold or used by any pers the name and address of any political committee to committee | son for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City Lake Bluff FEC ID number of contributing federal political committee. | State Zip Code IL 60044 | Date of Receipt M M D D 25 2009 Transaction ID: 20100113163038-128 Amount of Each Receipt this Period 25.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation Sr Dir, Marketing Aggregate Year-to-Date ▼ 550.00 | |
| Full Name (Last, First, Middle Initial) Griffith T. Lewis Mailing Address 823 Furlong Drive | | Date of Receipt |
| City <u>Libertyville</u> FEC ID number of contributing federal political committee. | State Zip Code IL 60048-3720 | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation VP, Operations Aggregate Year-to-Date ▼ 1000.00 | |
| Full Name (Last, First, Middle Initial) Raymond J. Linder Mailing Address 246 Montclair Road | | Date of Receipt 1 2 1 1 2 2 0 0 9 |
| City Vernon Hills FEC ID number of contributing federal political committee. | State Zip Code IL 60061 | Transaction ID: 2010011316304-42 Amount of Each Receipt this Period 46.68 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | Occupation VP, HR - Mfg/Supply Chain Aggregate Year-to-Date 1151.16 | |
| SUBTOTAL of Receipts This Page (optional |) | 1071.68 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 42 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11 |
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| Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (| nd Statements may not be sold or used by any person the name and address of any political committee to Committee | on for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) Ronald K. Lloyd Mailing Address 1694 Falling Star A City Westlake Village | NVe. State Zip Code CA 91362 | Date of Receipt 1 2 1 1 2 2 0 0 9 Transaction ID: 2010011316304-40 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 50.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General Other (specify) ▼ | Occupation Vpgm Biotherapeutic & Regn Med Aggregate Year-to-Date 1300.00 | |
| Full Name (Last, First, Middle Initial) Ronald K. Lloyd Mailing Address 1694 Falling Star A | ve. | Date of Receipt 1 2 2 5 2 0 0 9 |
| City | State Zip Code | Transaction ID: 20100113163038-40 |
| Westlake Village | CA 91362 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Vpgm Biotherapeutic & Regn Med | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1300.00 | |
| Full Name (Last, First, Middle Initial) Matthew A. Lykken | | Date of Receipt |
| Mailing Address 421 North Wheaton | n Ave | 12 11 2009 |
| City Wheaton | State Zip Code IL 60187 | Transaction ID: 2010011316304-178 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Baxter International Inc. | Occupation VP, Tax | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 650.00 | |
| SUBTOTAL of Receipts This Page (options | (IE | 125.00 |

| | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 43 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| | Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com | name and ad | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|) A. | Full Name (Last, First, Middle Initial) Matthew A. Lykken | | | Date of Receipt |
| | Mailing Address 421 North Wheaton Av | /e | | 12 25 2009 |
| | City <u>Wheaton</u> | State IL | Zip Code 60187 | Transaction ID: 20100113163038-178 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Baxter International Inc. | Occupation VP, Tax | on | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 650.00 | |
| В. | Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue | e NF | | Date of Receipt |
| | City | State | Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-130 |
| | Washington | DC | 20002 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 30.00 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, Fed | n Legislative Affairs | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 540.00 |] |
| C. | Full Name (Last, First, Middle Initial) Jack Maniko | l | | Date of Receipt |
| | Mailing Address 116 Tennessee Avenue | e NE | | 12 25 2009 |
| | City | State | Zip Code | Transaction ID: 20100113163038-130 |
| | Washington FEC ID number of contributing federal political committee. | C | 20002 | Amount of Each Receipt this Period 30.00 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, Fed | on Legislative Affairs | |
| | Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 540.00 | |
| | SUBTOTAL of Receipts This Page (optional) | | | 85.00 |
| İ | TOTAL This Period (last page this line number | only) | b | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 44 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|--|------------------------|---|--|
| Any information copied from such Reports and St or for commercial purposes, other than using the | atements ma | y not be sold or used by any persodress of any political committee to | |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com | mittee | | |
| / Full Name (Last, First, Middle Initial) Michael E. Martin | | | Date of Receipt |
| Mailing Address 10680 Red Leaf Circle | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 2010011316304-23 |
| Lakewood | IL | 60014 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 78.40 |
| Name of Employer Baxter Healthcare Corpora- | Occupatio | n g Strategic Planning | |
| tion Receipt For: | ` | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | Aggregate | 2022.50 | |
| Full Name (Last, First, Middle Initial) Michael E. Martin | | | Date of Receipt |
| Mailing Address 10680 Red Leaf Circle | | | M M / D D / Y Y Y Y Y Y 1 2 2 5 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 20100113163038-2 |
| <u>Lakewood</u> | IL | 60014 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 78.40 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupatio VP I, Mfg | n g Strategic Planning | |
| Receipt For: Primary General Other (specify) | | e Year-to-Date ▼ 2022.50 | |
| Full Name (Last, First, Middle Initial) Jeanne K. Mason | | | Date of Receipt |
| Mailing Address 1760 Duffy Lane | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 2010011316304-17 |
| Bannockburn | IL | 60015 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 170.77 |
| Name of Employer Baxter International Inc. | Occupatio Cvp, Hur | n man Resources | |
| Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 4420.02 | |
| SUBTOTAL of Receipts This Page (optional) | | | 327.57 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 45 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|--|--|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor | e name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Jeanne K. Mason Mailing Address 1760 Duffy Lane City Bannockburn FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) | State Zip Code IL 60015 C Occupation Cvp, Human Resources Aggregate Year-to-Date 4420.02 | Date of Receipt M |
| Full Name (Last, First, Middle Initial) Michael J. McAndrew Mailing Address 795 Foxmoor City Lake Zurich FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State Zip Code IL 60047 C Occupation Dir, Quality Aggregate Year-to-Date 921.44 | Date of Receipt M M M |
| Full Name (Last, First, Middle Initial) Michael J. McAndrew Mailing Address 795 Foxmoor City Lake Zurich FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State Zip Code IL 60047 C Occupation Dir, Quality Aggregate Year-to-Date 921.44 | Date of Receipt M M M / 25 / 2009 Transaction ID: 20100113163038-98 Amount of Each Receipt this Period 35.68 |
| SUBTOTAL of Receipts This Page (optional) | · | 242.13 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 46 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|---|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor | e name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Kevin K. McCulloch Mailing Address 730 Greenwood Avenu City Wilmette FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State Zip Code IL 60091-1748 C Occupation GM, Global Infusion Systems Aggregate Year-to-Date 260.00 | Date of Receipt 1 2 1 1 2 2 0 0 9 Transaction ID: 2010011316304-138 Amount of Each Receipt this Period 10.00 |
| Full Name (Last, First, Middle Initial) Kevin K. McCulloch Mailing Address 730 Greenwood Avenu City Wilmette FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State Zip Code IL 60091-1748 C Occupation GM, Global Infusion Systems Aggregate Year-to-Date 260.00 | Date of Receipt 12 25 2009 Transaction ID: 20100113163038-138 Amount of Each Receipt this Period 10.00 |
| Full Name (Last, First, Middle Initial) Bruce McGillivray Mailing Address 151 Ridge Lane City Lake Forest FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State Zip Code IL 60045 C Occupation Cvp, Pres Renal Aggregate Year-to-Date ▼ | Date of Receipt M M M |
| SUBTOTAL of Receipts This Page (optional) | | 183.08 |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 47 / 87 (check only one) X |
|--|---|---|
| Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | and Statements may not be sold or used by any persor g the name and address of any political committee to s | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Bruce McGillivray Mailing Address 151 Ridge Lane | | Date of Receipt |
| City Lake Forest FEC ID number of contributing | State Zip Code IL 60045 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-132 Amount of Each Receipt this Period 163.08 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | Occupation Cvp, Pres Renal Aggregate Year-to-Date ▼ 4226.24 | 100.00 |
| Full Name (Last, First, Middle Initial) John K. McVey Mailing Address 6320 Longwood R | oad | Date of Receipt |
| City Libertyville FEC ID number of contributing federal political committee. | State Zip Code IL 60048-9447 C | Transaction ID: 2010011316304-187 Amount of Each Receipt this Period 25.00 |
| Name of Employer BioLife Plasma L.L.C. Receipt For: Primary General Other (specify) ▼ | Occupation Sr Dir, Reg Affairs & Quality Aggregate Year-to-Date ▼ 275.00 | |
| Full Name (Last, First, Middle Initial) John K. McVey Mailing Address 6320 Longwood R | oad | Date of Receipt |
| City <u>Libertyville</u> FEC ID number of contributing federal political committee. | State Zip Code IL 60048-9447 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-187 Amount of Each Receipt this Period 25.00 |
| Name of Employer BioLife Plasma L.L.C. Receipt For: Primary General Other (specify) ▼ | Occupation Sr Dir, Reg Affairs & Quality Aggregate Year-to-Date ▼ 275.00 | |
| SUBTOTAL of Receipts This Page (option | al) | 213.08 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | X) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 48/8/ (check only one) |
|---|---------------------------------------|---|---|
| Any information copied from such Reports a or for commercial purposes, other than using | nd Statements may the name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (| Committee | | |
| Full Name (Last, First, Middle Initial) Kelli Mills Lester | | | Date of Receipt |
| Mailing Address 3140 creswell dr | | | 1 2 1 1 2 0 0 9 |
| City falls church | State VA | Zip Code 22044 | Transaction ID: 2010011316304-114 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 38.46 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupatio Dir, Rena | n al Federal Leg Affairs | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 900.01 | |
| Full Name (Last, First, Middle Initial) Kelli Mills Lester | | | Date of Receipt |
| Mailing Address 3140 creswell dr | | | 12 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City <u>falls church</u> | State VA | Zip Code 22044 | Transaction ID: 20100113163038-11 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 40.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupatio Dir, Rena | n al Federal Leg Affairs | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 900.01 | |
| Full Name (Last, First, Middle Initial) Barbara E. Morris | | | Date of Receipt |
| Mailing Address 924 N. Saratoga D | r. | | 12 11 2009 |
| City Palatine | State IL | Zip Code 60074 | Transaction ID: 2010011316304-24 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 10.00 |
| Name of Employer Baxter Healthcare Corpora- tion | | Global Functions | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 260.00 |] |
| SUBTOTAL of Receipts This Page (options |)) | | 88.46 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | ν) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 49/8/ (check only one) |
|--|---------------------------------------|---|---|
| Any information copied from such Reports an or for commercial purposes, other than using | nd Statements may the name and add | not be sold or used by any persolress of any political committee to | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | Committee | | |
| Full Name (Last, First, Middle Initial) Barbara E. Morris | | | Date of Receipt |
| Mailing Address 924 N. Saratoga Dr | | | 12 25 2009 |
| City Palatine | State IL | Zip Code 60074 | Transaction ID: 20100113163038-24 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 10.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, HR - | n Global Functions | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 260.00 | |
| Full Name (Last, First, Middle Initial) Michael Murphy | | | Date of Receipt |
| Mailing Address 340 E Scranton Ave One Baxter Parkwa | | | M M / D D / Y Y Y Y Y Y 1 1 1 2 0 0 9 |
| City <u>Lake Bluff</u> | State IL | Zip Code 60044 | Transaction ID: 2010011316304-70 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Corp | n orate Quality | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 400.00 | |
| Full Name (Last, First, Middle Initial) Michael Murphy | | | Date of Receipt |
| Mailing Address 340 E Scranton Ave One Baxter Parkwa | - | | 12 25 7 2009 |
| City <u>La</u> ke Bluff | State IL | Zip Code 60044 | Transaction ID: 20100113163038-69 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | - , ' | orate Quality | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 400.00 | |
| SUBTOTAL of Receipts This Page (optiona | J) | | 110.00 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 50 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|--|---|
| Any information copied from such Reports a or for commercial purposes, other than using | nd Statements may not be sold or used by any perso g the name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | | |
| Full Name (Last, First, Middle Initial) Timothy J. Murphy | | Date of Receipt |
| Mailing Address 14601 N Somerset | Circle | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 2010011316304-139 |
| <u>Libertyville</u> | IL 60048 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 29.10 |
| Name of Employer Baxter Healthcare Corpora- | Occupation Assistant General Counsel | |
| tion Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 750.72 | |
| Full Name (Last, First, Middle Initial) Timothy J. Murphy | | Date of Receipt |
| Mailing Address 14601 N Somerset | Circle | 12 25 2009 |
| City | State Zip Code | Transaction ID: 20100113163038-139 |
| Libertyville | IL 60048 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 29.10 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Assistant General Counsel | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 750.72 | |
| Full Name (Last, First, Middle Initial) Peter J. O'Malley | | Date of Receipt |
| Mailing Address 791 Summit Avenu | ue | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 2010011316304-156 |
| Lake Forest | IL 60045 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 45.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Business Alliances | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 1170.00 |] |
| SURTOTAL of Receipts This Page (option | al) | 103.20 |
| | nber only) | |

| SCHEDULE A (FEC FOI ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 51 / 87 (check only one) X |
|---|--|---|
| Any information copied from such Re or for commercial purposes, other the NAME OF COMMITTEE (In Full) Baxter Healthcare Political A | ports and Statements may not be sold or used by any person using the name and address of any political committee to action Committee | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Init Peter J. O'Malley Mailing Address 791 Summit | <u></u> | Date of Receipt |
| City Lake Forest FEC ID number of contributing federal political committee. | State Zip Code IL 60045 | Transaction ID: 20100113163038-156 Amount of Each Receipt this Period 45.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary Other (specify) ▼ | Occupation VP, Business Alliances Aggregate Year-to-Date ▼ 1170.00 |] |
| Full Name (Last, First, Middle Init Stasia L. Ogden Mailing Address 1750 W Cor | <u>'</u> | Date of Receipt 1 2 1 1 2 2 0 0 9 |
| City | State Zip Code | Transaction ID: 2010011316304-95 |
| Chicago | IL 60622 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 20.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Asst General Counsel, Patent | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 520.00 |] |
| Full Name (Last, First, Middle Init Stasia L. Ogden | al) | Date of Receipt |
| Mailing Address 1750 W Cor | land St | 12 25 2009 |
| City | State Zip Code | Transaction ID: 20100113163038-94 |
| Chicago FEC ID number of contributing federal political committee. | IL 60622 | Amount of Each Receipt this Period 20.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Asst General Counsel, Patent | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 520.00 | |
| SUBTOTAL of Receipts This Page | (optional) | 85.00 |

| SCHEDULE A (FEC Form 32 ITEMIZED RECEIPTS Any information copied from such Reports a | nd Statements may not | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 52 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions |
|---|---------------------------------------|--|--|
| or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | g the name and addres | s of any political committee to | solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Matthew Olsofsky Mailing Address 13065 Westport St | <u> </u> | | Date of Receipt |
| City | State | Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-109 |
| Moorpark | CA | 93021 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 10.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation Sr Mgr, Resc Aggregate Yea | |] |
| Full Name (Last, First, Middle Initial) Matthew Olsofsky | | | Date of Receipt |
| Mailing Address 13065 Westport St | t | | 12 25 2009 |
| City Moorpark | State CA | Zip Code 93021 | Transaction ID: 20100113163038-109 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 10.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Sr Mgr, Rese | earch | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Yea | ar-to-Date ▼ 260.00 | |
| Full Name (Last, First, Middle Initial) Tim J. Pasternak | | | Date of Receipt |
| Mailing Address 1933 Oaktree Trl. | | | 12 11 2009 |
| City Lake Villa | State IL | Zip Code 60046 | Transaction ID: 2010011316304-75 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 10.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, R&D Pro | ogram | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Yea | ar-to-Date ▼ 260.00 | |
| SUBTOTAL of Receipts This Page (options | al) | | 30.00 |

| SCHEDULE A (ITEMIZED REC | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 53 / 87 (check only one) X |
|---|---|---|---|
| or for commercial purpos | es, other than using the name a | nts may not be sold or used by any perso and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMIT Baxter Healthcare | EE (In Full) Political Action Committee |) | |
| Full Name (Last, Firs Tim J. Pasternak | t, Middle Initial) | | Date of Receipt |
| | 33 Oaktree Trl. | | 12 25 2009 |
| City Lake Villa | St IL | ate Zip Code 60046 | Transaction ID: 20100113163038-74 Amount of Each Receipt this Period |
| FEC ID number of co | | | 10.00 |
| Name of Employer Baxter Healthcare Co | rpora- Occ | supation R&D Program | 1 |
| tion Receipt For: Primary Other (specify) | General | gregate Year-to-Date ▼ 260.00 | |
| Full Name (Last, Firs John W. Percival | t, Middle Initial) | | Date of Receipt |
| Mailing Address 69 | 1 CYPRESS AVE | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | | ate Zip Code | Transaction ID: 2010011316304-118 |
| PASADENA FEC ID number of co federal political comm | | A 91103 | Amount of Each Receipt this Period 21.12 |
| Name of Employer Baxter Healthcare Co | rnoro | supation | _ |
| tion Receipt For: | I IVIG | r, Research gregate Year-to-Date ▼ | - |
| Primary Other (specify) | General | 543.54 | |
| Full Name (Last, Firs John W. Percival | i, Middle Initial) | | Date of Receipt |
| Mailing Address 69 | 1 CYPRESS AVE | | 12 25 2009 |
| City | St | ate Zip Code | Transaction ID: 20100113163038-1 |
| PASADENA | C | A 91103 | Amount of Each Receipt this Period |
| FEC ID number of co | | | 21.12 |
| Name of Employer Baxter Healthcare Co tion | rpora- Mg | supation r, Research | |
| Receipt For: Primary Other (specify) | General | gregate Year-to-Date ▼ 543.54 | |
| SUBTOTAL of Receipt | s This Page (optional) | | 52.24 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | ν) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 54/8/ (check only one) |
|--|---------------------------------------|---|---|
| Any information copied from such Reports ar or for commercial purposes, other than using | nd Statements may the name and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | Committee | | |
| Full Name (Last, First, Middle Initial) Jed M. Perry | | | Date of Receipt |
| Mailing Address 5678 Kirkham Cour | t | | 12 11 2009 |
| City Springfield | State VA | Zip Code 22151 | Transaction ID: 2010011316304-126 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Baxter Healthcare Corpora- tion | | Legislative Affairs | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 550.00 | |
| Full Name (Last, First, Middle Initial) Jed M. Perry | | | Date of Receipt |
| Mailing Address 5678 Kirkham Cour | t | | 12 25 2009 |
| City Springfield | State VA | Zip Code 22151 | Transaction ID: 20100113163038-12 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | LETO | 25.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir. Fed | n Legislative Affairs | |
| Receipt For: Primary General Other (specify) | Aggregate | year-to-Date ▼ 550.00 | |
| Full Name (Last, First, Middle Initial) Carla D. Pittman | | | Date of Receipt |
| Mailing Address 3933 Kenway Aven | ue | | 1 2 1 1 2 0 0 9 |
| City Los Angeles | State CA | Zip Code 90008 | Transaction ID: 2010011316304-13 |
| FEC ID number of contributing federal political committee. | C | 90000 | Amount of Each Receipt this Period 56.33 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Sr Couns | sel | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 1454.44 | |
| SUBTOTAL of Receipts This Page (optional | 1 | | 106.33 |

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 55 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11 |
|-------------------|--|----------------------------------|---|---|
| 7 | Any information copied from such Reports and Sor for commercial purposes, other than using the | Statements may e name and add | not be sold or used by any persolress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor | mmittee | | |
| . ∠ \ . | Full Name (Last, First, Middle Initial) Carla D. Pittman | | | Date of Receipt |
| ٦. | Mailing Address 3933 Kenway Avenue | | | 1 2 2 5 2 0 0 9 |
| | City | State | Zip Code | Transaction ID: 20100113163038-134 |
| | Los Angeles | CA | 90008 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 56.33 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupation Sr Couns | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | 1 |
| | Other (specify) ▼ | | 1454.44 | |
| _ 3. | Full Name (Last, First, Middle Initial) Michelle A. Priefer | -1 | | Date of Receipt |
| | Mailing Address 305 S.Delphia Avenue | 9 | | 12 11 YYYYY 12009 |
| | City | State | Zip Code | Transaction ID: 2010011316304-51 |
| | Park Ridge | <u> </u> | 60068 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 10.00 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupation Sr Dir Str | at & Portfolio Pl | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 230.00 | |
| _). | Full Name (Last, First, Middle Initial) Michelle A. Priefer | | | Date of Receipt |
| - | Mailing Address 305 S.Delphia Avenue | Э | | 12 25 2009 |
| | City | State | Zip Code | Transaction ID: 20100113163038-50 |
| | Park Ridge | <u>IL</u> | 60068 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 10.00 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupation Sr Dir Str | n at & Portfolio Pl | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 230.00 | |
| Γ | CURTOTAL of Descripts This Days (self. 1) | <u> </u> | | 76.33 |
| - | SUBTOTAL of Receipts This Page (optional) . | |) | |
| | TOTAL This Period (last page this line number | r only) |) | |

| SCHEDULE A (FEC Form | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 56 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1 |
|--|--|--|
| Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) Baxter Healthcare Political Actions in the Political Actions in th | orts and Statements may not be sold or used by any person using the name and address of any political committee to | son for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initia Virginia L. Pringle Mailing Address 6655 Bobby J | ones Ct | Date of Receipt |
| City <u>Palmetto</u> | State Zip Code FL 34221 | Transaction ID: 2010011316304-30 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 33.45 |
| Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ | Occupation Mgr Ii, Operations Aggregate Year-to-Date ▼ 863.82 | |
| Full Name (Last, First, Middle Initia Virginia L. Pringle Mailing Address 6655 Bobby J | , | Date of Receipt |
| City Palmetto FEC ID number of contributing federal political committee. | State Zip Code FL 34221 | Transaction ID: 20100113163038-30 Amount of Each Receipt this Period 33.45 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | Occupation Mgr Ii, Operations Aggregate Year-to-Date ▼ 863.82 | |
| Full Name (Last, First, Middle Initia Joseph A. Pudlo |) | Date of Receipt |
| Mailing Address 525 Trestle C | ourt | 12 11 2009 |
| City Grayslake | State Zip Code IL 60030 | Transaction ID: 2010011316304-31 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 20.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Sales | |
| Receipt For: Primary Other (specify) | Aggregate Year-to-Date ▼ 280.00 | |
| SUBTOTAL of Receipts This Page (| optional) | 86.90 |

| SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS | () | Use separate schedule(s) for each category of the | FOR LINE NUMBER: PAGE 57 / 87 (check only one) |
|---|--------------------------------------|---|--|
| TEMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 |
| Any information copied from such Reports an or for commercial purposes, other than using | d Statements may the name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions osolicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | Committee | | |
| Full Name (Last, First, Middle Initial) Joseph A. Pudlo | | | Date of Receipt |
| Mailing Address 525 Trestle Court | | | 1 2 2 5 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 20100113163038-3 |
| Grayslake | <u>IL</u> | 60030 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 20.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupatio VP, Sale | | |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 280.00 |] |
| Full Name (Last, First, Middle Initial) Julie A. Quick | | | Date of Receipt |
| Mailing Address 3223 Epstein Circle | ı | | 12 11 2009 |
| City | State | Zip Code | Transaction ID: 2010011316304-19 |
| Mundelein | <u>IL</u> | 60060 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 21.08 |
| Name of Employer BioLife Plasma L.L.C. | Occupatio Sr Mgr, F | n Reg Affairs | 7 |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 542.08 | |
| Full Name (Last, First, Middle Initial) Julie A. Quick | | | Date of Receipt |
| Mailing Address 3223 Epstein Circle | | | 12 25 2009 |
| City | State | Zip Code | Transaction ID: 20100113163038-1 |
| Mundelein | <u>IL</u> | 60060 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 21.08 |
| Name of Employer BioLife Plasma L.L.C. | Occupatio Sr Mgr, F | n Reg Affairs | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 542.08 |] |
| | | | 62.16 |

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 58 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|----------|---|-------------------------------|---|---|
| 7 | Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | tatements may name and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | Baxter Healthcare Political Action Com | nmittee | | |
| Α. | Full Name (Last, First, Middle Initial) Janet L. Raciti Mailing Address 19 Wimbledon Court | | | Date of Receipt |
| | City | State | Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-33 |
| | <u>Lincolnshire</u> | IL | 60069 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 40.00 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupatio Dir, Strat | n tegic Reimbursement | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 1040.00 | |
| _ В. | Full Name (Last, First, Middle Initial) Janet L. Raciti | l | | Date of Receipt |
| | Mailing Address 19 Wimbledon Court | | | 12 25 2009 |
| | City | State | Zip Code | Transaction ID: 20100113163038-33 |
| | Lincolnshire FEC ID number of contributing federal political committee. | C | 60069 | Amount of Each Receipt this Period 40.00 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupatio Dir, Strat | n tegic Reimbursement | |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 1040.00 | |
| с. С. | Full Name (Last, First, Middle Initial) Sundar Ramanan | | | Date of Receipt |
| | Mailing Address 1146 Azalea Way | | | 12 11 2009 |
| | City <u>Simi Valley</u> | State CA | Zip Code 93065 | Transaction ID: 2010011316304-140 |
| | FEC ID number of contributing federal political committee. | C | 93003 | Amount of Each Receipt this Period 13.55 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupatio Dir Tech | n Services, Pharma | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 349.90 | |
| | SUBTOTAL of Receipts This Page (optional) | 1 | | 93.55 |
| 上 | TOTAL This Period (last page this line number | | <u> </u> | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 59 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|---|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor | e name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Sundar Ramanan Mailing Address 1146 Azalea Way City Simi Valley FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State Zip Code CA 93065 C Occupation Dir Tech Services, Pharma Aggregate Year-to-Date ▼ 349.90 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) David H. Resnicoff Mailing Address 926 Valley Road City Glencoe FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) | State Zip Code IL 60022 C Occupation Assoc Gen Coun/VP Compliance Aggregate Year-to-Date 1472.44 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) David H. Resnicoff Mailing Address 926 Valley Road City Glencoe FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) | State Zip Code IL 60022 C Occupation Assoc Gen Coun/VP Compliance Aggregate Year-to-Date 1472.44 | Date of Receipt M |
| SUBTOTAL of Receipts This Page (optional) | | 127.77 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 60 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|--|--|--|
| Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (| nd Statements may not be sold or used by any person the name and address of any political committee to a | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Darwin Richardson Mailing Address 3927 Corte Cancio | n | Date of Receipt |
| City | State Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-50 |
| Thousand Oaks | CA 91360 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 20.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir Ii, Quality | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 520.00 | |
| Full Name (Last, First, Middle Initial) Darwin Richardson | L | Date of Receipt |
| Mailing Address 3927 Corte Cancio | n | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 20100113163038-49 |
| Thousand Oaks | CA 91360 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 20.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir Ii, Quality | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 520.00 | |
| Full Name (Last, First, Middle Initial) Amanda L. Robinson | | Date of Receipt |
| Mailing Address 6250 12th St | | 12 11 2009 |
| City | State Zip Code | Transaction ID: 2010011316304-98 |
| Kenosha | WI 53144 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 10.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Group Mgr, Marketing | |
| Receipt For: Primary General Other (specify) ♥ | Aggregate Year-to-Date ▼ 230.00 | |
| SUBTOTAL of Receipts This Page (optional | al) | 50.00 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | X) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 61 / 87 (check only one) X |
|---|-----------------------|---|---|
| Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (| the name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) Amanda L. Robinson Mailing Address 6250 12th St | | | Date of Receipt |
| City Kenosha FEC ID number of contributing | State WI | Zip Code 53144 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-97 Amount of Each Receipt this Period 10.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | Occupatio Group M | n gr, Marketing Year-to-Date ▼ |] |
| Full Name (Last, First, Middle Initial) Jill A. Rowlison Mailing Address 1280 21st St NW U Apt 906 City | Jnit 906 State | Zip Code | Date of Receipt M |
| Washington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General | | 20036 n e and Grassroots e Year-to-Date ▼ | Amount of Each Receipt this Period 22.69 |
| Primary General Other (specify) Full Name (Last, First, Middle Initial) Jill A. Rowlison Mailing Address 1280 21st St NW L | Jnit 906 | 559.72 | Date of Receipt |
| Apt 906 City Washington | State DC | Zip Code 20036 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-90 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- | Occupatio Mar. Pag | | 22.69 |
| tion Receipt For: Primary General Other (specify) ▼ | | and Grassroots Year-to-Date ▼ 559.72 | |
| SUBTOTAL of Receipts This Page (optional | al) |) | 55.38 |

A.

В.

C.

| SCHEDULE A (FEC Form 3X) | | Lloo concrete selectivis/s\ | FOR LINE NUMBER: PAGE 62 / 87 | | | |
|---|------------------------------|--|--|--|--|--|
| | | Use separate schedule(s) for each category of the | (check only one) | | | |
| ITEMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 | | | |
| | | ······································ | 13 14 15 16 17 | | | |
| Any information copied from such Reports and State or for commercial purposes, other than using the r | atements may name and ado | not be sold or used by any persoress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. | | | |
| NAME OF COMMITTEE (In Full) | | | | | | |
| Baxter Healthcare Political Action Com | mittee | | | | | |
| Full Name (Last, First, Middle Initial) Fredrick D. Ruda | | | Date of Receipt | | | |
| Mailing Address 1316 Ashland Ave. | | | 12 11 2009 | | | |
| City | State | Zip Code | Transaction ID: 2010011316304-47 | | | |
| Wilmette | IL | 60091 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | С | | 10.00 | | | |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, Finar | ı nce Baxter Capital | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 340.00 | | | | |
| Full Name (Last, First, Middle Initial) Fredrick D. Ruda | | | Date of Receipt | | | |
| Mailing Address 1316 Ashland Ave. | | | 12 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| City | State | Zip Code | Transaction ID: 20100113163038-46 | | | |
| Wilmette | IL | 60091 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | С | | 10.00 | | | |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, Finar | nce Baxter Capital | | | | |
| Receipt For: | Aggregate | Year-to-Date ▼ | | | | |
| Primary General Other (specify) ▼ | 0 0 | 340.00 | | | | |
| Full Name (Last, First, Middle Initial) Joseph Russo | | | Date of Receipt | | | |
| Mailing Address 27928 Periwinkle Lane | | | 12 11 2009 | | | |
| City | State | Zip Code | Transaction ID: 2010011316304-142 | | | |
| Valencia | CA | 91354 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | С | | 31.19 | | | |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, Envir | Health & Safety | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 805.93 | | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 51.19 | | | |

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 63 / 87 (check only one) X |
|---------|---|--------------------------|---|---|
| | Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com | name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| ∠ 4. | Full Name (Last, First, Middle Initial) Joseph Russo | | | Date of Receipt |
| | Mailing Address 27928 Periwinkle Lane | | | 12 / 25 / 2009 |
| | City Valencia | State CA | Zip Code 91354 | Transaction ID: 20100113163038-142 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 32.12 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, Envir | n r Health & Safety | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 805.93 | |
| _ 3. | Full Name (Last, First, Middle Initial) Roibin Ryan Mailing Address 1419 W Berteau | l | | Date of Receipt |
| | | | | 12 11 2009 |
| | City Chicago | State IL | Zip Code 60613 | Transaction ID: 2010011316304-172 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 99.41 |
| | Name of Employer Baxter International Inc. | Occupation Deputy G | n Gen Counsel, Lit & Empl | |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 2564.44 | |
| -). | Full Name (Last, First, Middle Initial) Roibin Ryan | | | Date of Receipt |
| | Mailing Address 1419 W Berteau | | | 12 25 2009 |
| | City | State | Zip Code | Transaction ID: 20100113163038-172 |
| | Chicago FEC ID number of contributing federal political committee. | C | 60613 | Amount of Each Receipt this Period 99.41 |
| | Name of Employer Baxter International Inc. | Occupation Deputy G | n Gen Counsel, Lit & Empl | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 2564.44 | |
| | SUBTOTAL of Receipts This Page (optional) | | | 230.94 |

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 64 / 87 (check only one) X 11a |
|-------------------|---|---|---|---|
| \ | Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com | name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| . ∠ . . | Full Name (Last, First, Middle Initial) James K. Saccaro | | | Date of Receipt |
| | Mailing Address Baxter Expat Admin PO PO Box 747 | O Box 747 | | 12 11 2009 |
| | City | State IL | Zip Code | Transaction ID: 2010011316304-184 |
| | Deerfield FEC ID number of contributing federal political committee. | C | 60015 | Amount of Each Receipt this Period 54.38 |
| | Name of Employer Baxter World Trade Corporation Receipt For: Primary General Other (specify) | , ' | Assignment Year-to-Date ▼ 1399.24 |] |
| _ 3. | Full Name (Last, First, Middle Initial) James K. Saccaro | | 0 0 0 0 0 0 0 | Date of Receipt |
| | Mailing Address Baxter Expat Admin PO PO Box 747 | O Box 747 | | 12 25 2009 |
| | City | State | Zip Code | Transaction ID: 20100113163038-184 |
| | Deerfield FEC ID number of contributing federal political committee. | C | 60015 | Amount of Each Receipt this Period 54.38 |
| | Name of Employer Baxter World Trade Corpor- ation | Occupation Away on | n Assignment | |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 1399.24 | |
| _ | Full Name (Last, First, Middle Initial) David P. Scharf | | | Date of Receipt |
| - | Mailing Address 931 Oak Street | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: 2010011316304-169 |
| | Winnetka FEC ID number of contributing federal political committee. | C | 60093 | Amount of Each Receipt this Period 81.73 |
| | Name of Employer Baxter International Inc. | Occupation Cvp. Cor | n p Secretary, Deputy Gc | 7 |
| | Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 1833.78 | |
| | SUBTOTAL of Receipts This Page (optional) | I | | 190.49 |

| | EDULE A (FEC Form 3X) IIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 65 / 87 (check only one) X 11a |
|--------------------|--|------------------------------|---|---|
| Any inf or for c | ormation copied from such Reports and S commercial purposes, other than using the | Statements mage name and add | y not be sold or used by any pers dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| \ | ME OF COMMITTEE (In Full) xter Healthcare Political Action Con | nmittee | | |
| | Name (Last, First, Middle Initial) | | | Date of Receipt |
| Mai | ling Address 931 Oak Street | | | 12 25 2009 |
| City W/i | , nnetka | State IL | Zip Code 60093 | Transaction ID: 20100113163038-169 Amount of Each Receipt this Period |
| FEC | C ID number of contributing eral political committee. | C | 00093 | 81.73 |
| Nan Bax | ne of Employer der International Inc. | Occupatio Cvp, Cor | n rp Secretary, Deputy Gc | |
| Rec | ceipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 1833.78 | |
| | Name (Last, First, Middle Initial) eph V. Schwan | I | | Date of Receipt |
| Mai | ling Address 1414 Laburnum Street North 17th Street | t | | 1 2 1 1 2 0 0 9 |
| City | , | State | Zip Code | Transaction ID: 2010011316304-125 |
| FEC | Lean C ID number of contributing | C | 22101 | Amount of Each Receipt this Period 10.00 |
| | eral political committee. ne of Employer _ | Occupatio | n | |
| Bax tion | ter Healthcare Corpora- | | Federal Govt Affairs | |
| Rec | ceipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 230.00 | |
| | Name (Last, First, Middle Initial) eph V. Schwan | <u> </u> | | Date of Receipt |
| Mai | ling Address 1414 Laburnum Street North 17th Street | t | | 12 25 2009 |
| City Mc | Lean | State VA | Zip Code 22101 | Transaction ID: 20100113163038-125 Amount of Each Receipt this Period |
| FEC | C ID number of contributing eral political committee. | C | ZETO! | 10.00 |
| Nan Bax tion | ne of Employer kter Healthcare Corpora- | Occupatio Sr Mgr, F | n Federal Govt Affairs | |
| | ceipt For: Primary General | Aggregate | e Year-to-Date ▼ | |
| | Other (specify) ▼ | | 230.00 | |
| SURT | OTAL of Receipts This Page (optional) | | | 101.73 |
| 3051 | OTAL OF HOSSIPIS THIS Fage (optional) | | | |

| SCHEDULE A (F | • | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 66 / 87 (check only one) X 11a |
|--|---------------------------------------|--|---|
| or for commercial purpose NAME OF COMMITTE | s, other than using the name and ac | ay not be sold or used by any person ddress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, | | | |
| | 21 Mission Hills Rd Unit 211 t 211 | | Date of Receipt 1 2 1 1 2 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 2010011316304-4 |
| Northbrook | IL | 60062 | Amount of Each Receipt this Period |
| FEC ID number of con federal political commit | | | 58.78 |
| Name of Employer Baxter Healthcare Corp tion | oora- Occupatii | on fg Strategic Planning | |
| Receipt For: Primary Other (specify) | General | e Year-to-Date ▼ 1511.48 | |
| Full Name (Last, First, Chandra Sekhar | Middle Initial) | Date of Receipt | |
| Mailing Address 162 | 21 Mission Hills Rd Unit 211 t 211 | | 12 25 2009 |
| City | State | Transaction ID: 20100113163038-4 | |
| Northbrook | <u> L</u> | 60062 | Amount of Each Receipt this Period |
| FEC ID number of con federal political commit | | | 58.78 |
| Name of Employer Baxter Healthcare Corp tion | oora- Occupatie VP Ii, M | on fg Strategic Planning | |
| Receipt For: Primary Other (specify) | General | e Year-to-Date ▼ 1511.48 | |
| Full Name (Last, First, Jeffrey Allen Sexton | Middle Initial) | | Date of Receipt |
| | Cochran View Drive | | 12 11 2009 |
| City <u>Marion</u> | State NC | Zip Code 28752 | Transaction ID: 2010011316304-85 Amount of Each Receipt this Period |
| FEC ID number of con federal political commit | | | 8.33 |
| Name of Employer Baxter Healthcare Corp tion | Occupation Supv Ii, | on Manufacturing | |
| Receipt For: Primary Other (specify) | General | e Year-to-Date ▼ 227.28 | |
| SUBTOTAL of Receipts | This Page (optional) | | 125.89 |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 67 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|--|--|--|
| Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | and Statements may not be sold or used by any persong the name and address of any political committee to | on for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) Jeffrey Allen Sexton Mailing Address 19 Cochran View | Drive | Date of Receipt |
| City <u>Marion</u> | State Zip Code NC 28752 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-84 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. Name of Employer | Occupation | 11.90 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Supv Ii, Manufacturing Aggregate Year-to-Date ▼ 227.28 | |
| Full Name (Last, First, Middle Initial) George N. Sfondilis Mailing Address 1010 Glencrest Dr | rive | Date of Receipt |
| City | State Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-127 |
| Inverness | IL 60010 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 11.54 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Project Mgr Ii, IT | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 219.26 | |
| Full Name (Last, First, Middle Initial) George N. Sfondilis Mailing Address 1010 Glencrest Di | rive | Date of Receipt |
| | | 12 25 2009 |
| City Inverness | State Zip Code IL 60010 | Transaction ID: 20100113163038-12 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 11.54 |
| Name of Employer Baxter Healthcare Corpora- tion Receipt For: | Occupation Project Mgr Ii, IT | |
| Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 219.26 | |
| SUBTOTAL of Receipts This Page (option | nal) | 34.98 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 68 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|--|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Col | Statements may not be sold or used by any person e name and address of any political committee to mmittee | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) John P. Shannon Mailing Address 432 Utley City Elmhurst FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State Zip Code IL 60126 C Occupation VP Ii, Marketing Aggregate Year-to-Date 1412.20 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) John P. Shannon Mailing Address 432 Utley City Elmhurst FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State Zip Code IL 60126 C Occupation VP Ii, Marketing Aggregate Year-to-Date 1412.20 | Date of Receipt M |
| Full Name (Last, First, Middle Initial) Terry (John) Simmons Mailing Address 1013 Windhaven Roa City Libertyville FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | State Zip Code IL 60048 C Occupation VP, Global Purchasing Aggregate Year-to-Date 270.00 | Date of Receipt M M M |
| SUBTOTAL of Receipts This Page (optional) . | _ | 124.72 |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 69 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action | and Statements may not be sold or used by any person the name and address of any political committee to Committee | son for the purpose of soliciting contributions to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Terry (John) Simmons Mailing Address 1013 Windhaven I | Road | Date of Receipt |
| City <u>Libertyville</u> FEC ID number of contributing | State Zip Code IL 60048 | 1 2 2 5 2 0 0 9 Transaction ID: 20100113163038-148 Amount of Each Receipt this Period 15.00 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | Occupation VP, Global Purchasing Aggregate Year-to-Date 270.00 | |
| Full Name (Last, First, Middle Initial) Lori E. Sims Mailing Address 66 Cooper Drive | | Date of Receipt 1 2 1 1 2 0 0 9 |
| City | State Zip Code | Transaction ID: 2010011316304-96 |
| Glastonbury FEC ID number of contributing federal political committee. | CT 06033 | Amount of Each Receipt this Period 22.39 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ | Occupation Mgr, State Government Affairs Aggregate Year-to-Date ▼ 578.54 | |
| Full Name (Last, First, Middle Initial) Lori E. Sims | | Date of Receipt |
| Mailing Address 66 Cooper Drive | | 12 25 2009 |
| City | State Zip Code | Transaction ID: 20100113163038-95 |
| Glastonbury FEC ID number of contributing federal political committee. | CT 06033 | Amount of Each Receipt this Period 22.39 |
| Name of Employer Baxter Healthcare Corporation Receipt For: | Occupation Mgr, State Government Affairs Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | Aggregate Year-to-Date V | |
| SUBTOTAL of Receipts This Page (option | al) | 59.78 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 70 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any information copied from such Reports a or for commercial purposes, other than usin | nd Statements may not be sold or used by any person the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (| Committee | |
| Full Name (Last, First, Middle Initial) Deborah G. Spak | | Date of Receipt |
| Mailing Address 1555 Stratford | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 2010011316304-176 |
| <u>Deerfield</u> FEC ID number of contributing federal political committee. | IL 60015 | Amount of Each Receipt this Period 13.56 |
| Name of Employer Baxter International Inc. | Occupation Dir, Communications | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 348.66 | |
| Full Name (Last, First, Middle Initial) Deborah G. Spak | | Date of Receipt |
| Mailing Address 1555 Stratford | | 1 2 2 5 2 0 0 9 |
| City | State Zip Code | Transaction ID: 20100113163038-176 |
| Deerfield | IL 60015 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 13.56 |
| Name of Employer Baxter International Inc. | Occupation Dir, Communications | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 348.66 | |
| Full Name (Last, First, Middle Initial) Elizabeth F. Stoll | L | Date of Receipt |
| Mailing Address 975 Seaboard Ave | | 1 2 1 1 2 0 0 9 |
| City | State Zip Code | Transaction ID: 2010011316304-135 |
| Atlanta FEC ID number of contributing federal political committee. | GA 30318 | Amount of Each Receipt this Period 9.90 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Mgr Ii, State Govt Affairs | _ |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 255.72 | |
| SUBTOTAL of Receipts This Page (options | al) | 37.02 |
| | nber only) | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 71 / 87 (check only one) X |
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| Ar or | y information copied from such Reports and for commercial purposes, other than using th | Statements may be name and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co | mmittee | | |
| /_ | Full Name (Last, First, Middle Initial) Elizabeth F. Stoll | | | Date of Receipt |
| | Mailing Address 975 Seaboard Ave | | | 12 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Atlanta | State GA | Zip Code 30318 | Transaction ID: 20100113163038-13 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 9.90 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupation Mgr Ii, St | ate Govt Affairs | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 255.72 | |
| | Full Name (Last, First, Middle Initial) Elizabeth L. Stoltz | | | Date of Receipt |
| | Mailing Address 371 W. Sparrow Drive | е | | 12 11 2009 |
| | City | State | Zip Code | Transaction ID: 2010011316304-121 |
| | Chandler FEC ID number of contributing | AZ | 85286 | Amount of Each Receipt this Period |
| | federal political committee. | C | | 10.00 |
| | Name of Employer Baxter Healthcare Corpora- tion | Occupation Sr Mgr, H | n Healthcare Reimb | |
| | Receipt For: | _ | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 220.00 | |
| | Full Name (Last, First, Middle Initial) Elizabeth L. Stoltz | | | Date of Receipt |
| | Mailing Address 371 W. Sparrow Drive | е | | 12 25 2009 |
| | City | State | Zip Code | Transaction ID: 20100113163038-12 |
| | Chandler FEC ID number of contributing federal political committee. | C | 85286 | Amount of Each Receipt this Period |
| | Name of Employer Baxter Healthcare Corpora- | Occupation | | |
| | tion Receipt For: | _ | lealthcare Reimb Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 7.5g, 5gato | 220.00 | |
| | UBTOTAL of Receipts This Page (optional). | 1 | | 29.90 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 72 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commercial purposes. | nd Statements may not be sold or used by any person the name and address of any political committee to Committee | on for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) Donald J. Sullivan Mailing Address 910 W Cypress Driv | ve | Date of Receipt |
| City | State Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-161 |
| Arlington Heights FEC ID number of contributing federal political committee. | IL 60005 | Amount of Each Receipt this Period 40.00 |
| Name of Employer Baxter International Inc. | Occupation VP, Risk Management | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1040.00 | |
| Full Name (Last, First, Middle Initial) Donald J. Sullivan | | Date of Receipt |
| Mailing Address 910 W Cypress Dri | 12 25 2009 | |
| City Arlington Heights | State Zip Code IL 60005 | Transaction ID: 20100113163038-16 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 40.00 |
| Name of Employer Baxter International Inc. | Occupation VP, Risk Management | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1040.00 | |
| Full Name (Last, First, Middle Initial) David M. Swartz | | Date of Receipt |
| Mailing Address 24644 Montevista | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Valencia | State Zip Code CA 91354 | Transaction ID: 2010011316304-104 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 10.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Mgr Ii, Quality Lab | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 230.00 | |
| SUBTOTAL of Receipts This Page (optional | J) | 90.00 |

SCHEDULE A (FEC Form 3X)

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 73 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Con | name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) David M. Swartz Mailing Address 24644 Montevista City Valencia FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) | State Zip Code CA 91354 C Occupation Mgr Ii, Quality Lab Aggregate Year-to-Date 230.00 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) Karenann Terrell Mailing Address 914 Queens Lanes City Glenview FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) | State Zip Code IL 60025 C Occupation Cvp, Chief Information Officer Aggregate Year-to-Date 5000.00 | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) Karenann Terrell Mailing Address 914 Queens Lanes City Glenview FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) | State Zip Code IL 60025 C Occupation Cvp, Chief Information Officer Aggregate Year-to-Date 5000.00 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| SUBTOTAL of Receipts This Page (optional) | > | 394.56 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 74 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11 |
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| Any information copied from such Reports and S or for commercial purposes, other than using the | Statements may not be sold or used by any perso e name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor | nmittee | |
| Full Name (Last, First, Middle Initial) Ronald J. Trudeau | | Date of Receipt |
| Mailing Address 416 W Oakwood Dr | | 1 2 1 1 2 2 0 0 9 |
| City | State Zip Code | Transaction ID: 2010011316304-1 |
| Barrington | IL 60010 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Baxter Healthcare Corpora- | Occupation VP Ii, Engineering | |
| tion Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 650.00 | |
| Full Name (Last, First, Middle Initial) Ronald J. Trudeau | | Date of Receipt |
| Mailing Address 416 W Oakwood Dr | | 12 25 2009 |
| City | State Zip Code | Transaction ID: 20100113163038-1 |
| Barrington | IL 60010 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP Ii, Engineering | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 650.00 | |
| Full Name (Last, First, Middle Initial) Onelia Ann Vera | I. | Date of Receipt |
| Mailing Address 619 Oleander Drive | | 12 11 2009 |
| City | State Zip Code | Transaction ID: 2010011316304-144 |
| <u>Hallandale</u> | FL 33009 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 100.89 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Assistant General Counsel | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 2603.22 | |
| SUBTOTAL of Receipts This Page (optional) | | 150.89 |
| TOTAL This Period (last page this line number | · | |

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) Cheela Ann Wara Mailing Address 619 Oleander Drive City Purpose of Cocupation Receipt For: Purpose of Comparation Mailing Address 4306 Arenzano Way City State Zip Code Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Portinary General Other (specify) ▼ Cocupation Marie of Employer Marie of Employer Marte of Employ | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the | FOR LINE NUMBER: PAGE 75 / 87 (check only one) |
|---|--|--------------|---|---|
| NAME OF COMMITTEE (in Full) Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) Chies P Viautin Mailing Address 619 Oleander Drive City Full Name (Last, First, Middle Initial) Chies P Viautin Mailing Address 4306 Arenzano Way City Fill Dorado Hills CA 95762 FEC ID number of contributing tederal political committee. C | IT LIMIZED ITECLIF 13 | | Detailed Summary Page | |
| Baxter Healthcare Political Action Committee | Any information copied from such Reports and St or for commercial purposes, other than using the | atements may | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Chela Ann Vera Mailing Address 619 Oleander Drive City State Zip Code Hallandale FL 33009 FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Chies P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code Primary General Chies P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code EEC ID number of contributing federal political committee. C A 95762 Full Name (Last, First, Middle Initial) Chris P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code EEC ID number of contributing federal political committee. C A 95762 Full Name (Last, First, Middle Initial) Chris P. Viaulin Name of Employer Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Chris P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code Primary General C A 95762 Full Name (Last, First, Middle Initial) Chris P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code Primary General C A 95762 Full Name (Last, First, Middle Initial) Chris P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code EI Dorado Hills C A 95762 Full Name (Last, First, Middle Initial) Chris P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code EI Dorado Hills C A 95762 Full Name (Last, First, Middle Initial) Chris P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code EI Dorado Hills C A 95762 Full Name (Last, First, Middle Initial) Chris P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code EI Dorado Hills C A 95762 Full Name (Last, First, Middle Initial) Chris P. Viaulin Mailing Address 4306 Arenzano Way City State Zip Code Transaction ID: 20100113163038 Amount of Each Receipt Marchana Marc | , , | mittoo | | |
| Date of Receipt | / | millee | | |
| City State Zip Code Hallandale FL 33009 FEC ID number of contributing federal political committee. C | , | | | Date of Receipt |
| Hallandale | Mailing Address 619 Oleander Drive | | | |
| FEC ID number of contributing federal political committee. C | · · | | · | Transaction ID: 20100113163038-1- |
| Name of Employer Santer Healthcare Corporation Aggregate Year-to-Date Transaction ID: 20100113163048 | | FL | 33009 | Amount of Each Receipt this Period |
| Receipt For: | | C | | 100.89 |
| Receipt For: Primary General Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2603.22 Full Name (Last, First, Middle Initial) Chris P. Vlautin Mailing Address 4306 Arenzano Way | Name of Employer Baxter Healthcare Corpora- | | | |
| Primary General Other (specify) ▼ 2603.22 Full Name (Last, First, Middle Initial) Chris P. Vlautin Mailing Address 4306 Arenzano Way City State Zip Code CA 95762 FEC ID number of contributing rederal political committee. Name of Employer Baxter Healthcare Corporation Mgr, State Government Affairs Aggregate Year-to-Date ▼ Transaction ID: 20100113163048 Aggregate Year-to-Date ▼ Transaction ID: 20100113163048 Date of Receipt Transaction ID: 20100113163048 Amount of Each Receipt this Period Primary General Other (specify) ▼ | | | | _ |
| Full Name (Last, First, Middle Initial) Chris P. Vlautin Mailing Address 4306 Arenzano Way City State Zip Code CA 95762 Transaction ID: 2010011316304-5 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ C State Zip Code CA 95762 Transaction ID: 2010011316304-5 Amount of Each Receipt this Period Transaction ID: 2010011316304-5 Amount of Each Receipt this Period Date of Receipt Transaction ID: 2010011316304-5 Amount of Each Receipt this Period Date of Receipt Transaction ID: 2010011316304-5 Amount of Each Receipt this Period Date of Receipt Transaction ID: 2010011316304-5 Amount of Each Receipt this Period Date of Receipt Transaction ID: 2010011316304-5 Amount of Each Receipt this Period Date of Receipt Transaction ID: 2010011316304-5 Transaction ID: 2010011316304-5 Amount of Each Receipt this Period Date of Receipt Transaction ID: 2010011316304-5 Transaction ID: 2010011316304- | | Aggregate | | 1 |
| Chris P. Vlautin Mailing Address 4306 Arenzano Way City State Zip Code CA 95762 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Primary General Other (specify) ▼ C State Zip Code C Amount of Each Receipt this Period C 20.00 Date of Receipt Transaction ID: 2010011316304-5 Amount of Each Receipt this Period Amount of Each Receipt this Period C 20.00 Full Name (Last, First, Middle Initial) Chris P. Vlautin Mailing Address 4306 Arenzano Way City State Zip Code CA 95762 Transaction ID: 20100113163038 El Dorado Hills CA 95762 FEC ID number of contributing federal political committee. C 30.00 Transaction ID: 20100113163038 Amount of Each Receipt this Period C 20.00 C 20.00 | Other (specify) ▼ | | 2603.22 | |
| City State Zip Code El Dorado Hills CA 95762 REC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ City State Zip Code CA 95762 Coccupation Mgr, State Government Affairs Aggregate Year-to-Date ▼ City State Zip Code CA 95762 Date of Receipt this Period Date of Receipt Date of Receipt M M M J D D J J Y Y 2 0 0 9 Transaction ID: 2010011316304-5 Amount of Each Receipt this Period Date of Receipt M M M J D D J J Y Y 0 0 0 9 Transaction ID: 20100113163036 Date of Receipt M M M J D D J J Y Y 0 0 0 9 Transaction ID: 20100113163038 Amount of Each Receipt this Period City State Zip Code CA 95762 Transaction ID: 20100113163038 Amount of Each Receipt this Period C 20.00 Transaction ID: 20100113163038 Amount of Each Receipt this Period C 20.00 Transaction ID: 20100113163038 Amount of Each Receipt this Period Amount of Each Receipt this Period Amount of Each Receipt To: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ | | | | Date of Receipt |
| City State Zip Code CA 95762 FEC ID number of contributing federal political committee. C | | | | M M / D D / Y Y Y Y |
| El Dorado Hills CA 95762 Amount of Each Receipt this Period C 20.00 Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Ca 95762 Amount of Each Receipt this Period C 20.00 Date of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ City State Zip Code El Dorado Hills CA 95762 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Receipt For: Aggregate Year-to-Date ▼ Transaction ID: 20100113163038 Amount of Each Receipt this Period Transaction ID: 20100113163038 Amount of Each Receipt this Period Transaction ID: 20100113163038 Amount of Each Receipt this Period Transaction ID: 20100113163038 Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: 20100113163038 Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: 20100113163038 Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: 20100113163038 Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: 20100113163038 Amount of Each Receipt this Period Transaction ID: 20100113163038 Amount of Each Receipt this Period Transaction ID: 20100113163038 Amount of Each Receipt this Period Transaction ID: 20100113163038 Transaction ID: 20100113163038 Amount of Each Receipt this Period Transaction ID: 20100113163038 Transaction ID: | City | State | Zip Code | Transaction ID: 2010011316304-90 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ City State Zip Code EI Dorado Hills FEI Dorado Hills CA 95762 CC CA 95762 CC CC Receipt Transaction ID: 20100113163038 Amount of Each Receipt this Period CC CC CC CC CC COCupation Mgr, State Government Affairs Aggregate Year-to-Date ▼ COCcupation Mgr, State Government Affairs Aggregate Year-to-Date ▼ COCCUPATION Aggregate Year-to-Date ▼ | El Dorado Hills | CA | 95762 | Amount of Each Receipt this Period |
| tion Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Chris P. Vlautin Mailing Address 4306 Arenzano Way City El Dorado Hills FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Occupation Mgr, State Government Affairs Aggregate Year-to-Date ▼ Transaction ID: 20100113163038 Amount of Each Receipt this Period C 20.00 | | C | | 20.00 |
| Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Late of Receipt Date of Receipt Mailing Address 4306 Arenzano Way City El Dorado Hills CA 95762 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ | Name of Employer Baxter Healthcare Corpora- | | | |
| Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Chris P. Vlautin Mailing Address 4306 Arenzano Way City State Zip Code El Dorado Hills CA 95762 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Affairs | | | | _ |
| Chris P. Vlautin Mailing Address 4306 Arenzano Way City State Zip Code EI Dorado Hills CA 95762 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 20100113163038 Amount of Each Receipt this Period 20.00 | Primary General | riggregate | |] |
| Mailing Address 4306 Arenzano Way City State Zip Code EI Dorado Hills CA 95762 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 20100113163038 Amount of Each Receipt this Period 20.00 Aggregate Year-to-Date ▼ 460.00 | Full Name (Last, First, Middle Initial) Chris P. Vlautin | | | Date of Receipt |
| El Dorado Hills CA 95762 Amount of Each Receipt this Period C 20.00 Name of Employer Baxter Healthcare Corporation Receipt For: Primary Other (specify) ▼ Amount of Each Receipt this Period C 40.00 Amount of Each Receipt this Period Aggregate Year-to-Date 460.00 | | | | M M / D D / Y Y Y Y |
| FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) Occupation Mgr, State Government Affairs Aggregate Year-to-Date 460.00 | • | | Zip Code | Transaction ID: 20100113163038-8 |
| Name of Employer Baxter Healthcare Corporation Receipt For: Primary Other (specify) Occupation Mgr, State Government Affairs Aggregate Year-to-Date 460.00 | El Dorado Hills | CA | 95762 | Amount of Each Receipt this Period |
| Baxter Healthcare Corporation Mgr, State Government Affairs Receipt For: Primary Other (specify) Aggregate Year-to-Date 460.00 | | C | | 20.00 |
| Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00 | | | | |
| Primary General Other (specify) ▼ 460.00 | | <u> </u> | | |
| 140.00 | Primary General | 33 33 11 | |] |
| | | | | 140.89 |

SCHEDULE A (FEC Form 3X)

| | LE A (FEC Form 3X) O RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE N (check only only only only only only only only | |
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| or for commerc | n copied from such Reports and cial purposes, other than using the COMMITTEE (In Full) ealthcare Political Action Co | ne name and ad | y not be sold or used by any pers dress of any political committee to | on for the purpos o solicit contribut | se of soliciting contributions tions from such committee. |
| A. Robert J. W Mailing Add City Lake Fore FEC ID nur federal polit Name of Er Baxter Hea tion Receipt For | est mber of contributing tical committee. mployer althcare Corpora- | | Zip Code 60045-4704 on tegy & Portfolio PIng e Year-to-Date 500.00 | | · |
| City Arlington FEC ID nur federal politi Name of Er Baxter Heation Receipt For | Heights The state of the state | _ ' ' ' ' | Zip Code 60004 | | <u>.</u> |
| City Arlington FEC ID nur federal polit Name of Er Baxter Hea tion Receipt For | Heights The street of the str | _ | Zip Code 60004 on dical Affairs e Year-to-Date ▼ | | Receipt / 25 |
| SUBTOTAL | of Receipts This Page (optional) | | | | 520.00 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports ar | for each category of Detailed Summary | of the X 11a 11b 11c 12 13 14 15 16 17 Day any person for the purpose of soliciting contributions |
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| or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | | ómmittee to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Cheryl L. White Mailing Address 4069 Mayfield Street | et | Date of Receipt |
| City | State Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-160 |
| Newbury Park | CA 91320 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 148.85 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Cvp, Quality | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 51.62 |
| Full Name (Last, First, Middle Initial) Cheryl L. White | | Date of Receipt |
| Mailing Address 4069 Mayfield Stree | et | 12 25 2009 |
| City Newbury Park | State Zip Code CA 91320 | Transaction ID: 20100113163038-160 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 148.85 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Cvp, Quality | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 51.62 |
| Full Name (Last, First, Middle Initial) Deborah K. Williams | | Date of Receipt |
| Mailing Address 3805 Fenchurch Ro | ı | 12 11 2009 |
| City Baltimore | State Zip Code MD 21218 | Transaction ID: 2010011316304-92 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Dir, Public Policy | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 00.00 |
| SUBTOTAL of Receipts This Page (optional | l) | 347.70 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 78 / 87 (check only one) X 11a |
|--|-----------------------------|---|---|
| Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | tatements ma name and ad | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Baxter Healthcare Political Action Com | ımittee | | |
| Full Name (Last, First, Middle Initial) Deborah K. Williams | | | Date of Receipt |
| Mailing Address 3805 Fenchurch Rd | | | 12 25 2009 |
| City | State | Zip Code | Transaction ID: 20100113163038-9 |
| <u>Baltimore</u> | MD | 21218 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- | Occupation | n ic Policy | |
| tion Receipt For: | | e Year-to-Date | |
| Primary General Other (specify) ▼ | , iggi ogait | 1300.00 | |
| Full Name (Last, First, Middle Initial) Vernon E. Williams | | | Date of Receipt |
| Mailing Address 1601 Wyndham Court | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 2010011316304-13 |
| Santa Ana | CA | 92705 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Infor | n mation Technology | |
| Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 1300.00 | |
| Full Name (Last, First, Middle Initial) Vernon E. Williams | | | Date of Receipt |
| Mailing Address 1601 Wyndham Court | | | 12 25 2009 |
| City | State | Zip Code | Transaction ID: 20100113163038-13 |
| Santa Ana | CA | 92705 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, Infor | n rmation Technology | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 1300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 150.00 |

| SCHEDULE A (FEC Form 3X) | , | Use separate schedule(s) for each category of the | FOR LINE NUMBER: PAGE 79 / 87 (check only one) |
|--|--------------------------------|---|---|
| TEMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 |
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may ne name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co | ommittee | | |
| Full Name (Last, First, Middle Initial) | | | |
| Ron K. Wilson Mailing Address 6800 Red Rock Road | 1 | | Date of Receipt |
| City | State | Zip Code | 1 2 1 1 2 0 0 9 Transaction ID: 2010011316304-10 |
| <u>Amarillo</u> | TX | 79118 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 20.00 |
| Name of Employer Baxter Healthcare Corpora- | Occupation | n presentative lii | |
| tion Receipt For: | | e Year-to-Date | |
| Primary General Other (specify) ▼ | - Inggregate | 440.00 | |
| Full Name (Last, First, Middle Initial) Ron K. Wilson | | | Date of Receipt |
| Mailing Address 6800 Red Rock Road | t | | 12 25 2009 |
| City | State | Zip Code | Transaction ID: 20100113163038-1 |
| Amarillo | TX | 79118 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 20.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation Sales Re | n presentative lii | |
| Receipt For: Primary General Other (specify) | | Year-to-Date ▼ 440.00 | |
| Full Name (Last, First, Middle Initial) Subramaniam Yogendran | | | Date of Receipt |
| Mailing Address Baxter Healthcare Co One Baxter Parkway | | er | 12 11 2009 |
| City | State | Zip Code | Transaction ID: 2010011316304-10 |
| Deerfield | <u>IL</u> | 60015 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion | Occupation VP, U.S. | n Supply Chain | |
| Receipt For: | Aggregate | Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 1265.72 | |
| | | | |

SCHEDULE A (FEC Form 3X)

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 80 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C | the name and addres | ot be sold or used by any pers ss of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Subramaniam Yogendran Mailing Address Baxter Healthcare C One Baxter Parkwa | | | Date of Receipt 1 2 2 5 2 0 0 9 |
| City | State | Zip Code | Transaction ID: 20100113163038-107 |
| Deerfield | IL | 60015 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Baxter Healthcare Corpora- tion Receipt For: | Occupation VP, U.S. St Aggregate Ye | upply Chain ear-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 1265.72 | |
| Full Name (Last, First, Middle Initial) Todd S. Young | • | | Date of Receipt |
| Mailing Address Baxter Expatriate A PO Box 747 | | | 12 11 2009 |
| City | State | Zip Code | Transaction ID: 2010011316304-183 |
| Deerfield FEC ID number of contributing federal political committee. | C | 60015 | Amount of Each Receipt this Period |
| Name of Employer Baxter World Trade Corpor- ation | Occupation Away on As | signment | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Ye | ear-to-Date ▼ 260.00 | |
| Full Name (Last, First, Middle Initial) Todd S. Young | | | Date of Receipt |
| Mailing Address Baxter Expatriate Ad PO Box 747 | dmin PO Box 747 | | 12 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 20100113163038-183 |
| Deerfield FEC ID number of contributing federal political committee. | C | 60015 | Amount of Each Receipt this Period |
| Name of Employer Baxter World Trade Corporation | Occupation Away on As | signment | |
| Receipt For: Primary General Other (specify) | | ear-to-Date ▼ 260.00 | |
| SUBTOTAL of Receipts This Page (optiona |) | | 70.00 |

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SCHEDULE A (FEC Form 3X)

PAGE 81 / 87 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) Mahshid R. Zahed Date of Receipt Mailing Address 1175 N Museum Blvd. Unit 301 12 2009 11 Unit 301 City State Zip Code Transaction ID: 2010011316304-108 Vernon Hills IL 60061 Amount of Each Receipt this Period FEC ID number of contributing 50.00 C federal political committee. Name of Employer Baxter Healthcare Corpora-Occupation VP, Quality Gis tion Receipt For: Aggregate Year-to-Date General Primary 450.00 Other (specify) Full Name (Last, First, Middle Initial) Mahshid R. Zahed Date of Receipt Mailing Address 400 Village Green Drive Unit 106 25 2009 Unit 301 City State Zip Code Transaction ID: 20100113163038-108 Lincolnshire IL 60069 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Baxter Healthcare Corpora-Occupation VP, Quality Gis tion Receipt For: Aggregate Year-to-Date

450.00

| SUBTOTAL of Receipts This Page (optional) | • | 100.00 |
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| TOTAL This Period (last page this line number only) | • | 11822.04 |

Primary

Other (specify)

General

| Any Information copied from such Reports and State or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commit | | | 22 X 23 24 25 26 28a 28b 28c 29 30 |
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| or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) | | | for the number of collection contributions |
| ` ' | | Il committee to so | |
| Daxiel Healthoare Folitical Action Commi | ittee | | |
| Full Name (Last, First, Middle Initial) Hagan for Us Senate Inc | | | Transaction ID: 3E5A7E5E96B2D023 Date of Disbursement |
| Mailing Address PO Box 29103 | | | $\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} 2 & 2 \\ 2 & 2 \end{bmatrix} / \begin{bmatrix} 2 & 2 \\ 2 & 2 \end{bmatrix} $ |
| City Greensboro | State Zip Code NC 27429 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement 2014 Primary | | 011 | 2000.00 |
| Candidate Name Kay R. Hagan Office Sought: House Disburs | sement For: 2014 | Category/ Type | |
| | X Primary General Other (specify) ▼ | | |
| Full Name (Last, First, Middle Initial) Marion Berry for Congress | | | Transaction ID: 5D259B14DF40E67B Date of Disbursement |
| Mailing Address PO Box 8084 PO Box 8084 | | | $\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 2^{M} & \begin{smallmatrix} D \\ 2 \end{smallmatrix} 2^{D} & \begin{smallmatrix} V \\ 2 \end{smallmatrix} 2^{V} 0^{V} 9^{V} \end{bmatrix}$ |
| City Jonesboro | State Zip Code AR 72403 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement 2010 Primary Candidate Name | | 011 | 1000.00 |
| Marion Berry | sement For: 2010 | Category/ Type | |
| | X Primary General Other (specify) ▼ | | |
| Full Name (Last, First, Middle Initial) Marsha Blackburn for Congress Inc. | | | Transaction ID: B39B25B2F9B23648 Date of Disbursement |
| Mailing Address PO Box 682185 | | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} $ |
| City Franklin | State Zip Code TN 37068 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement 2010 Primary | | 011 | 1000.00 |
| Candidate Name Marsha Blackburn | | Category/ Type | |
| Senate) President | sement For: 2010 K Primary General Other (specify) | | |
| State: TN District: 07 | | _ | 4000.00 |
| SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only | | | 400.00 |

SCHEDULE B (FEC Form 3X)

| TEMPER PIOPURCEMENTS | Use separate schedule(s) | (check or | = NUMBER: lly one) | PAGE 83/8/ |
|--|---|--------------------------|-----------------------|----------------------------------|
| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | 21b 27 | 22 X 23 28a 28b | 24 25 26 28c 29 30 |
| Any Information copied from such Reports and Stat or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Comm | me and address of any politica | | | |
| Full Name (Last, First, Middle Initial) New Millennium Pac Mailing Address PO Box 632 | | | Date of Disburs | : 78945548CF75A0F7A |
| City Union City | State Zip Code NJ 07087 | | Amount of Each | Disbursement this Period |
| Purpose of Disbursement 2009 Contribution Candidate Name New Millennium Pac | | 011 Category/ Type | | 2000.00 |
| Senate President | sement For: 2009 Primary General X Other (specify) ibution | | | |
| Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee Mailing Address PO Box 8331 | | | Date of Disburs | : A62C44E93799A2EC ement 6 |
| City Fremont Purpose of Disbursement | State Zip Code CA 94537 | | Amount of Each | Disbursement this Period |
| Uncashed 3/31/2009 contribution Candidate Name Fortney H. Pete Stark | | 011 Category/ Type | | |
| , <u>, , , , , , , , , , , , , , , , , , </u> | sement For: 2010 X Primary General Other (specify) ▼ | 71 | | |
| Full Name (Last, First, Middle Initial) Schiff for Congress | | | Date of Disburs | |
| Mailing Address 777 S. Figueroa St. Suite 4050 | | | 12 / 2 | 2 2 |
| City Los Angeles | State Zip Code CA 90017 | | Amount of Each | Disbursement this Period |
| Purpose of Disbursement 2010 Primary | | 011 | | 1000.00 |
| Candidate Name Adam B. Schiff Office Sought: X House Disbut | sement For: 2010 | Category/ Type | - | |
| | X Primary General Other (specify) | | | |
| SUBTOTAL of Disbursements This Page (optional | l) | | | 2000.00 |
| TOTAL This Period (last page this line number on | | | | 6000.00 |

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| | mation copied from such Repor | | | | ny perso | n for the | purpose of | soliciting contributions |
| \ | OF COMMITTEE (In Full) er Healthcare Political Acti | on Committee | | | | | | |
| | ame (Last, First, Middle Initial) | | | | | Tra | ansaction I | D: C36D615B601C6F6 |
| Citize | ens for Gronstal | | | | | | ate of Disbu | rsement |
| Mailin | g Address 220 Bennett A | Ave | | | | 1 | 2 | 22 2009 |
| City Cour | icil Bluffs | State IA | Zip Code 51503 | | | An | nount of Ea | ch Disbursement this Period |
| | se of Disbursement deral Contribution | | | | | 7 L | | 300.00 |
| | date Name | | | Cat | 011 egory/ ype | | | |
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| State: | | | | | | | | |
| | ame (Last, First, Middle Initial) mittee to Elect Dvorsky | | | | | Da | ate of Disbu | |
| Mailin | g Address 412 6th Stree | t | | | | 1 | 2 / [| $\begin{bmatrix} 2 & 2 \\ 2 & 2 \end{bmatrix} \begin{bmatrix} 4 & 2 & 0 & 0 & 9 \\ 2 & 2 & 0 & 0 & 9 \end{bmatrix}$ |
| City Cora | lville | State IA | Zip Code 52241 | | | An | nount of Ea | ch Disbursement this Period |
| | se of Disbursement deral Contribution | | | |)11 | T L | | 200.00 |
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| | Sought: House Senate President | Disbursement For Primar Other | | ! | · | | | |
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| Com | mittee to Elect Heddens | | | | | Da | ate of Disbu | rsement |
| Mailin | g Address 4541 513th A | ve | | | | | 2 / [| 22 7 2009 |
| City Ames | 5 | State IA | Zip Code 50014 | | | An | nount of Ea | ch Disbursement this Period |
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SCHEDULE B (FEC Form 3X)

| Transaction ID: Address Political Action Committee Primary President Primary | SCHEDULE B (FEC Form 3X) | Use separate schedule(s) | | FOR LINE NUMBER: | | Р | PAGE 85 / 87 | |
|---|---|--------------------------|------|------------------|--------------|--------------|-------------------|--|
| Transaction ID: ACCOUNTING | ITEMIZED DISBURSEMENTS | for each category of the | | 21b | | | | |
| Baxter Healthcare Political Action Committee | or for commercial purposes, other than using the na | | | | | | | |
| Concerned Citizens for Miller Mailing Address 6766 Ridges Court City State Zip Code Bettendorf IA 52722 Purpose of Disbursement Nondedral Contribution Candidate Name Office Sought: House President Other (specify) ▼ City Senate President Other (specify) ▼ City Senate President Other (specify) ▼ City State Zip Code IA 51354 Purpose of Disbursement Nondedral Contribution Candidate Name Office Sought: House Senate Primary General Disbursement Tor: Senate IA 51354 City Senate Primary General Nondedral Contribution Candidate Name Office Sought: House Senate Primary General Disbursement For: Senate Primary General Disbursement Nondedral Contribution Candidate Name Office Sought: House Senate Primary General Disbursement For: Senate Primary General District: Full Name (Last, First, Middle Initial) Kettering Campaign Mailing Address 275 Crescent Park Drive City Senate President Other (specify) ▼ State Zip Code IA 51450 Purpose of Disbursement Nondedral Contribution Candidate Name Office Sought: House IA 51450 Purpose of Disbursement Nondedral Contribution Candidate Name Office Sought: House Senate Primary General Disbursement Nondedral Contribution Candidate Name Office Sought: House Senate Primary General Disbursement Nondedral Contribution Candidate Name Office Sought: House Senate Primary General Disbursement Nondedral Contribution Candidate Name Office Sought: House Senate Primary General Disbursement Nondedral Contribution Candidate Name Office Sought: House Senate Primary General Disbursement Senate Primary General Disbursement District: Substotal Other (specify) ▼ Substotal Of Disbursements This Page (optional) ■ 550.00 | , , | nittee | | | | | | |
| City State: Disbursement District: Full Name (Last, First, Middle Initial) Johnson for Senate Number 3 Mailing Address PO Box 279 City Office Sought: House Disbursement For: Senate President District: Full Name (Last, First, Middle Initial) Johnson for Senate Number 3 Mailing Address PO Box 279 City State Zip Code Ocheyedan IA 51354 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: House President District: Full Name (Last, First, Middle Initial) Kettering Campaign Mailing Address 275 Crescent Park Drive City State Zip Code Category' Type Office Sought: President District: Full Name (Last, First, Middle Initial) Kettering Campaign Mailing Address 275 Crescent Park Drive City State Zip Code Category' Type Other (specify) ▼ Transaction ID: E8CA42B790594 Amount of Each Disbursement this Per Category' Type Transaction ID: E8CA42B790594 Amount of Each Disbursement this Per Category' Type Amount of Each Disbursement this Per Category' Type Transaction ID: E8CA42B790594 Date of Disbursement Inits Per Category' Type Office Sought: House Primary General Contribution Candidate Name Office Sought: House Senate Primary General Contribution Category' Type Office Sought: House Senate Primary General Contribution Cardidate Name District: Primary General Contribution Category' Type State: Disbursement For: Senate Primary General Cother (specify) Type State: Disbursement For: Senate Primary General Cother (specify) Type State: District: Primary General Cother (specify) Ty | | | | | Date of Disb | ursement | | |
| Bettendorf IA 52722 Purpose of Disbursement Nonrederal Contribution Candidate Name Office Sought: House Senate President Other (specify) ▼ City District: Full Name (Last, First, Middle Initial) Johnson for Senate Number 3 Mailing Address PO Box 279 City Ocheyedan IA 51354 Purpose of Disbursement Nonrederal Contribution Candidate Name Office Sought: House President Initial Senate Primary General Primary General Other (specify) ▼ City Other (specify) ▼ Transaction ID: 2483E842839BDi Date of Disbursement this Per Date of Disbursement this Per Ocheyedan IA 51354 Purpose of Disbursement Primary General Other (specify) ▼ Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Kettering Campaign Mailing Address 275 Crescent Park Drive City State Zip Code Lake View IA 51450 Purpose of Disbursement Por: State Zip Code Lake View IA 51450 Purpose of Disbursement Por: State Zip Code Lake View IA 51450 Purpose of Disbursement This Per Other (specify) ▼ Amount of Each Disbursement This Per Other (specify) ▼ Amount of Each Disbursement This Per Other (specify) ▼ Amount of Each Disbursement This Per Disbursement | Mailing Address 6766 Ridges Court | | | | 1 2 1 | 22 / | [*] 2009 | |
| Nonfederal Contribution Candidate Name Office Sought: House Senate President Primary General President In State: District: Full Name (Last, First, Middle Initial) State: District: Primary General Primary Date of Disbursement For: Senate President State: Disbursement For: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: House Senate Primary General General General General Primary General Primary General Ge | Bettendorf | | | | Amount of E | ach Disburs | | |
| Office Sought: | Nonfederal Contribution | | _ | | | | 200.00 | |
| Johnson for Senate Number 3 Mailing Address PO Box 279 City Cheyedan IA 51354 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: House Primary General Primary General Disbursement Mailing Address 275 Crescent Park Drive City Lake View IA 51450 Purpose of Disbursement Mailing Address 275 Crescent Park Drive City Lake View IA 51450 Purpose of Disbursement Nonfederal Contribution Candidate Name Disbursement For: General Park Drive City State Zip Code IA 51450 Purpose of Disbursement Nonfederal Contribution Candidate Name Other (specify) ▼ Amount of Each Disbursement this Per 2 0 0 9 9 10 0 1 1 1 1 1 1 1 1 1 1 1 1 1 | Senate President | Primary General | Ту | pe | | | | |
| City Ocheyedan IA 51354 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ City State: District: Full Name (Last, First, Middle Initial) Kettering Campaign Mailing Address 275 Crescent Park Drive City State View IA 51450 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: House IA 51450 Purpose of Disbursement Nonfederal Contribution Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ State View IA 51450 District: District: Other (specify) ▼ Substorement For: Senate Primary General Other (specify) ▼ State: District: District: Senate Primary General Other (specify) ▼ Substorements This Page (optional) ▼ Substorements This Page (optional) ▼ Substorements This Page (optional) ▼ State: District: State: Disbursements This Page (optional) ▼ State: District: State: Disbursements This Page (optional) ▼ Substorement This Page (optional) ▼ State: District: State: Disbursements This Page (optional) → State: Disbursements This Pag | • | | | | Date of Disb | ursement | | |
| Ocheyedan IA 51354 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kettering Campaign Mailing Address 275 Crescent Park Drive City State Zip Code Lake View IA 51450 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: House Primary General Disbursement this Per IA 51450 Office Sought: House Primary General Disbursement This Per IA 51450 Office Sought: House Primary General Disbursement This Per IA 51450 Substitute District: State: District: Disbursement For: Senate Primary General Disbursement This Per IA 51450 Substitute Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement This Page (optional) ▼ Substitute Disbursements This Page (optional) ▼ Substitute Disbursements This Page (optional) ▼ Substitute Disbursements This Page (optional) ■ 550.00 | Mailing Address PO Box 279 | | | | 1"2 " | 22 | 2009 | |
| Nonfederal Contribution Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kettering Campaign Mailing Address 275 Crescent Park Drive City State Zip Code Lake View IA 51450 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State Zip Code IA 51450 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substorted Amount of Each Disbursement this Per Category/Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: | Ocheyedan | | | | Amount of E | ach Disburs | | |
| Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Kettering Campaign Mailing Address 275 Crescent Park Drive City State Zip Code IA 51450 Purpose of Disbursement Nonfederal Contribution Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ State: District: District: State: District: District: | Nonfederal Contribution | | Cate | gory/ | | | 200.00 | |
| Kettering Campaign Date of Disbursement Mailing Address 275 Crescent Park Drive City State Zip Code Lake View IA 51450 Amount of Each Disbursement this Per 150.00 Amount of Each Disbursement this Per 150.00 Amount of Each Disbursement this Per 150.00 Type Office Sought: House Office Sought: House Disbursement For: Senate Primary General Other (specify) V Substitute: Substitute: Substitute: District: Substitute: Substitute: Disbursements This Page (optional) | Senate President | Primary General | | po | | | | |
| City State Zip Code Lake View IA 51450 Purpose of Disbursement Nonfederal Contribution Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ SUBTOTAL of Disbursements This Page (optional) Amount of Each Disbursement this Per 150.00 Amount of Each Disbursement this Per 150.00 Amount of Each Disbursement this Per 150.00 State: District: State: Disbursement For: Senate Primary General Other (specify) ▼ 550.00 | | | | | Date of Disb | ursement | | |
| Lake View IA 51450 Purpose of Disbursement Nonfederal Contribution 011 Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: 550.00 | Mailing Address 275 Crescent Park Driv | ve | | | 1 2 / | 22 / | 2009 | |
| Nonfederal Contribution Candidate Name Office Sought: House Senate Primary General Primary General Other (specify) State: District: Subtotal of Disbursements This Page (optional) | Lake View | | | | Amount of E | ach Disburs | | |
| Office Sought: House Senate Primary General Other (specify) State: District: Substruct: Disbursements This Page (optional) 550.00 | Nonfederal Contribution | | Cate | gory/ | | | 130.00 | |
| SUBTOTAL of Disbursements This Page (optional) | Senate President | Primary General | Ту | pe | | | | |
| TOTAL This Period (last page this line number only) | <u> </u> | (la | | <u> </u> | | | 550.00 | |
| FE6AN026 FEC Schedule B (Form 3X) (Revis | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | ly) | | • | FF0. 0-1 | adala D./ Fa | | |

FE6AN026

| SCHEDULE B (FEC FORM 3X) | | arate schedule(s) | | OR LINE neck only | NUMBEI | ₹: | PA | GE 86/87 |
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| ITEMIZED DISBURSEMENTS | | category of the Summary Page | | 21b 27 | 22 28a | 23 28b | 24 28c | 25 X 29 |
| Any Information copied from such Reports and Stator for commercial purposes, other than using the national forces. | | | | | | | | |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Comn | nittee | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | | 6294570D3C |
| Mark Smith for House | | | | | Date of | f Disburs | ement | YYY |
| Mailing Address 816 Roberts Terrace | | | | | 12 | | 22 | Ž 0 Ŏ 9 Š |
| City Marshalltown | State IA | Zip Code 50158 | | | Amoui | nt of Each | Disburser | ment this Period |
| Purpose of Disbursement Nonfederal Contribution | | | 01 | 1 | | - | | 200.00 |
| Candidate Name | | | Categ Typ | - 1 | | | | |
| Office Sought: House Disbu Senate President | Primary Other (spe | General | | | | | | |
| State: District: | | | | | | | | |
| Full Name (Last, First, Middle Initial) Neighbors for Hatch | | | | | | f Disburs | ement | 069824ECC27 |
| Mailing Address 1623 Woodland Ave | | | | | 12 | / D2 | 2 D / Y | ž 0 0 9 ° |
| City Des Moines | State IA | Zip Code 50309 | | | Amoui | nt of Each | Disburser | ment this Period |
| Purpose of Disbursement Nonfederal Contribution | | | 01 | 1 | | | | 200.00 |
| Candidate Name | | | 01 Categ | jory/ | | | | |
| Senate President | rsement For: Primary Other (spe | General ecify) ▼ | | | | | | |
| State: District: Full Name (Last, First, Middle Initial) | | | | | | | 54505 | A F0004 F70D |
| Oldson for State Representative | | | | | Date o | f Disburs | ement | AF6681F78D |
| Mailing Address 418 38th Place | | | | | 12 | / D | 2 2 / Y | 2009 |
| City Des Moines | State IA | Zip Code 53012 | | | Amoui | nt of Each | Disburser | ment this Period |
| Purpose of Disbursement Nonfederal Contribution | | | 01 | 1 | | | | 200.00 |
| Candidate Name | | | Categ | jory/ | | | | |
| Office Sought: House Disbu | rsement For: Primary Other (spe | General | 71- | | | | | |
| State: District: | - (7) | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional | al) | | | • | | | | 600.00 |
| TOTAL This Period (last page this line number or | · | | | | + | • | • • • | 333.34 |

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В.

| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE (check only 21b 27 | one) 22 |
|---|---|-----------------------------|--|
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name | | | |
| NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commit | tee | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: B9D57555DC8F398971 |
| Ragan for Iowa Senate | | | Date of Disbursement |
| Mailing Address 20 Granite Court SE | | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $ |
| City Mason City | State Zip Code IA 50401 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement Nonfederal Contribution | | 011 | 200.00 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President State: District: | ement For: Primary General Other (specify) | | |
| Full Name (Last, First, Middle Initial) | | | |
| Upmeyer for House | | | Transaction ID: 78800626B69444B14C8 Date of Disbursement |
| Mailing Address 2175 Pine Avenue | | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 \end{smallmatrix} & 2 \begin{smallmatrix} M \\ 2 \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 \end{smallmatrix} & 2 \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 \end{smallmatrix} & 2 \end{smallmatrix} & 0 \end{smallmatrix} & 9 \\ \end{bmatrix}$ |
| City Garner | State Zip Code IA 50438 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement Nonfederal Contribution | | 011 | 200.00 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President State: District: | ement For: Primary General Other (specify) | | |

| SUBTOTAL of Disbursements This Page (optional) | <u> </u> | 400.00 |
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| TOTAL This Period (last page this line number only) | • | 2250.00 |